

Scholarship Application

St. Clair County Association of School Boards (SCCASB)

"To encourage students to choose a career track that recognizes the economic needs of communities including the trade careers."

Applicant Information							
Name							
Address							
City, State, Zip	Но	me Phone					
I am a legal resident of							
Date of Birth							
Does your father have a degree or certifica	ition beyond a high	school diploma	a? Yes	No			
If yes, what (associate, bachelors, etc.)? _							
Does your mother have a degree or certific	ation beyond a high	school diplom	na? Yes	No			
If yes, what?							
Do you have any siblings who have attend	ed/are attending co	lege? Yes	No				
Please specify your ethnicity or race:							
White	Mixed Race						
Hispanic or Latino	Other:						
Black or African American							
Will you have reliable transportation to college or trade school? Yes No							
If no, please explain:							
Do you currently have stable housing?	Yes	No					
If no, please explain:							
Have you ever had to give your parent(s) n	noney to help pay b	lls? Ye	es No				
If yes, please explain:							
Have you ever worried about having enoug	gh to eat?	Yes	No				
High School Data							
What high school did you (or will you) grad	uate from?						
what high school did you (of will you) grad	date IIOIII!						
Graduation Date	Cumulative GPA (based on 4.0 scale)						

Post-Secondary School Data	1		
I plan to attend a 2-year community college.	Ye	s No)
I plan to attend a 4-year college or university.	Ye	s No	
I pan to attend a trade school.	Ye	s No	
If yes, what school and whenIntended Major	Intended Minor_		
What are your college/career plans? What inspired you			
Educational Expenses			
Estimate your total expenses for the academic year	\$	_	
How much will you be able to provide?	\$		
How will you acquire this amount? (savings, employments) Have you sent in your application for FAFSA? Yes	ent, other scholarships,	, etc.)	
If yes, what is your EFC?	 		
Are you eligible for the State of Michigan Tuition Incen	tive Program (TIP)?	Yes	No
I certify that my application and accompanying material understand that my signature verifies that I (not a par accompanying materials.			
Name		Da	te
Additional Requirements			
Please name the TEACHER who most influenced your decisi- will receive a mentor award.	,	, and the second	
Mr./Mrs./Ms First Name			
Address			
Phone			
The following must be returned along with this application	on to Kiis wurpny at St	Ciair County F	AESA.

- Copy of High School and St. Clair TEC (if applicable) transcripts
- Letter of recommendation from teacher, counselor or principal
- In no more than 2 pages, please answer the following questions:
 - What one accomplishment (nonacademic) are you most proud of, why?
 - What, if any, barriers do you see facing in order to complete a college degree program or trade school? (Financial, transportation, housing, etc.)