

WEST KENTUCKY COMMUNITY AND TECHNICAL COLLEGE

Scholarship Application

2008 - 2009

INSTRUCTIONS

- Review the **WKCTC Scholarship Opportunities** brochure.
- Complete each section of the **WKCTC Scholarship Application**.
 - ⇒ Your **scholarship eligibility is based upon the information provided on this application**. Please include as much information as possible.
 - ⇒ Students may elect to complete any or all of the **Optional Information** section of this application; however, such information may be required to be eligible for specific scholarships. For instance, a student applying for the John T. Smith Scholarship must indicate his or her race to be considered. The WKCTC Scholarship Office is not responsible for notifying applicants as to their eligibility based upon Optional Information provided.
- **High School Seniors**
 - ⇒ Have high school counselor **complete the Counselor's Verification**.
 - ⇒ Obtain **official seventh-semester transcript** from high school.
 - ⇒ Have **ACT scores sent to WKCTC**.

Submit application **AND** all required documentation to the
WKCTC Scholarship Office in Carson Hall (second floor) no later than March 3, 2008, 4:30 p.m.

GENERAL APPLICANT INFORMATION

Select One:

- Current High School Senior (Including Home School Students)
Expected to graduate in spring of 2008.
- Currently Enrolled WKCTC Student
*Completed a minimum of 24 graded college hours at WKCTC upon completion of spring 2008 semester.
Developmental classes excluded.*
- Other
*Completed between 12 and 23 graded college hours at WKCTC upon completion of spring 2008 semester.
Developmental classes included.*

SSN: _____ Student ID: _____

First Name: _____ Middle Initial: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ County of Residence: _____

Full Name of Father (or guardian): _____ Living Deceased

Address (if different from your own): _____

Full Name of Mother (or guardian): _____ Living Deceased

Address (if different from your own): _____

HIGH SCHOOL INFORMATION

Year, or Expected Year, of Graduation: _____

High School Attended:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Ballard Memorial HS | <input type="checkbox"/> Fulton County HS | <input type="checkbox"/> Marshall County HS | <input type="checkbox"/> Reidland HS |
| <input type="checkbox"/> Cairo HS | <input type="checkbox"/> Fulton HS | <input type="checkbox"/> Massac County HS | <input type="checkbox"/> St. Mary HS |
| <input type="checkbox"/> Caldwell County HS | <input type="checkbox"/> Graves County HS | <input type="checkbox"/> Mayfield HS | <input type="checkbox"/> Trigg County HS |
| <input type="checkbox"/> Calloway County HS | <input type="checkbox"/> Heath HS | <input type="checkbox"/> Meridian HS | <input type="checkbox"/> Vienna HS |
| <input type="checkbox"/> Carlisle County HS | <input type="checkbox"/> Hickman County HS | <input type="checkbox"/> Murray HS | <input type="checkbox"/> GED |
| <input type="checkbox"/> Century HS | <input type="checkbox"/> Joppa HS | <input type="checkbox"/> Northside Baptist Christian School | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Christian Fellowship | <input type="checkbox"/> Livingston Central HS | <input type="checkbox"/> Paducah Tilghman HS | _____ |
| <input type="checkbox"/> Crittenden County HS | <input type="checkbox"/> Lone Oak HS | <input type="checkbox"/> Pope County HS | _____ |
| <input type="checkbox"/> Community Christian Academy | <input type="checkbox"/> Lyon County HS | | |

Counselor's Verification: For Currently Enrolled High School Seniors Only

This section must be completed by the applicant's high school counselor. All information should be as of the end of the seventh semester.

ACT Composite Score: _____

GPA (on a 4.00 scale): _____

Rank in Class: _____ of _____ students.

Counselor's Signature: _____ Date: _____

- Remember to:**
1. Obtain official seventh-semester transcript from high school.
 2. Have ACT scores sent to WKCTC.
 3. Submit both with your completed application.

It is the responsibility of the STUDENT to ensure that all required information is included with this application and received at the WKCTC Scholarship Office by the printed deadline.

COLLEGE INFORMATION

Possible Occupation Choice: _____

NOTE: Pre-Chiropractic students must provide a statement of mentorship from a certified chiropractor. Contact the Scholarship Office for correct form.

Major / Area of Study or Intended Major / Area of Study:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Accounting Technology | <input type="checkbox"/> Dental Hygiene | <input type="checkbox"/> Administration | <input type="checkbox"/> Office Systems Technology: Medical Assistant |
| <input type="checkbox"/> Adult Agriculture | <input type="checkbox"/> Diagnostic Medical Sonography | <input type="checkbox"/> Machine Tool Technology | <input type="checkbox"/> Physical Therapist Assistant |
| <input type="checkbox"/> Air Conditioning Technology | <input type="checkbox"/> Diesel Technology | <input type="checkbox"/> Manufacturing Industrial Technology: Electrical Technology | <input type="checkbox"/> Pre-Engineering |
| <input type="checkbox"/> Barbering | <input type="checkbox"/> Education | <input type="checkbox"/> Manufacturing Industrial Technology: Engineering Technology | <input type="checkbox"/> Radiology |
| <input type="checkbox"/> Business Administration | <input type="checkbox"/> Fine Arts | <input type="checkbox"/> Manufacturing Industrial Technology: Industrial Maintenance Technology | <input type="checkbox"/> Realtime Captioning Technology: Broadcast Captioner / CART Provider |
| <input type="checkbox"/> Business Administration: Accounting | <input type="checkbox"/> Fire & Rescue Science Technology | <input type="checkbox"/> Mathematics | <input type="checkbox"/> Realtime Captioning Technology: Judicial Provider |
| <input type="checkbox"/> Business Administration: Finance | <input type="checkbox"/> Health Physics | <input type="checkbox"/> Medical Assisting | <input type="checkbox"/> Respiratory Care |
| <input type="checkbox"/> Business Administration: Hospitality Management | <input type="checkbox"/> Health Unit Coordinator | <input type="checkbox"/> Nursing: Advanced Nursing Assistant | <input type="checkbox"/> Science |
| <input type="checkbox"/> Business Administration: Real Estate | <input type="checkbox"/> Historic Preservation Technology | <input type="checkbox"/> Nursing: Associate Degree | <input type="checkbox"/> Social Science |
| <input type="checkbox"/> Computer Aided Drafting: Architectural | <input type="checkbox"/> Humanities | <input type="checkbox"/> Nursing: Nurse Aide | <input type="checkbox"/> Surgical Technology |
| <input type="checkbox"/> Computer Aided Drafting: Mechanical | <input type="checkbox"/> Information Technology | <input type="checkbox"/> Nursing: Practical Nursing | <input type="checkbox"/> Truck Driving Training |
| <input type="checkbox"/> Construction Carpentry Technology | <input type="checkbox"/> Information Technology: Cisco | <input type="checkbox"/> Office Systems Technology: Administrative | <input type="checkbox"/> Visual Communication / Multimedia |
| <input type="checkbox"/> Cosmetology | <input type="checkbox"/> Information Technology: Computer Programming | <input type="checkbox"/> Office Systems Technology: Financial Assistant | <input type="checkbox"/> Welding Technology |
| <input type="checkbox"/> Culinary Arts | <input type="checkbox"/> Information Technology: Computer Support Specialist | <input type="checkbox"/> Office Systems Technology: Legal Administrative Assistant | <input type="checkbox"/> Undecided |
| <input type="checkbox"/> Culinary Arts: Catering | <input type="checkbox"/> Information Technology: Database Administration (Microsoft) | | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Culinary Arts: Food & Beverage Management | <input type="checkbox"/> Information Technology: Microsoft | | _____ |
| <input type="checkbox"/> Dental Assisting | <input type="checkbox"/> Information Technology: Network | | |

OPTIONAL INFORMATION

Students may elect to complete any or all of the Optional Information section of this application; however, such information may be required to be eligible for specific scholarships. The following are examples of how the WKCTC Scholarship Office uses Optional Information to determine eligibility:

- A student applying for the John T. Smith Scholarship must indicate his or her race to be considered.
- A student applying for the Kentucky Colonels Better Life Scholarship must provide his or her sex, marital status, and information about household children.
- A 2008 FAFSA is required to be considered for any scholarship where financial need is a consideration. See FAFSA Information below.

This list is not inclusive: please refer to the WKCTC Scholarship Opportunities brochure for the eligibility criteria of all scholarships. The WKCTC Scholarship Office is not responsible for notifying applicants as to their eligibility based upon Optional Information provided.

Age: _____ Race: _____ Sex: Female Male

Marital Status: Single Married Divorced Separated

Number of Dependent Children: _____

Ages of Dependent Children: _____

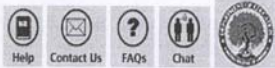


For All Students: FAFSA Information

Do not wait until the last minute to begin the FAFSA process!

FAFSA

2008-2009



Need help with this page? This page may scroll downward.

FAFSA on the Web Submission Confirmation

JOHN D., congratulations on completing your application! Your FAFSA on the Web application has been submitted to the U.S. Department of Education.

Your confirmation number is: xxxxxxxx RE xx/xx/xx

If you have access to a printer, we recommend you print this page out and keep it for your records. If you do not have access to a printer, write down the COMPLETE confirmation number and keep it for your records. This confirmation number is proof that your FAFSA on the Web application was received.

Your estimated Expected Family Contribution (EFC) is: xxxxxxxx

A 2008-2009 FAFSA Web Submission Confirmation report, like the one pictured, **MUST** be submitted with your scholarship application to be considered for any scholarship based on financial need. This process can take several weeks and the WKCTC Scholarship Office is unable to accept any other report, except the Web Submission Confirmation report pictured.

The WKCTC Federal School Code is 001979

Complete your application online at
www.fafsa.ed.gov

APPLICANT SIGNATURE

I certify that all statement and information provided on this application are true and correct to the best of my knowledge. I give permission for use of my information for media releases or required audits. If selected, my information may be shared with scholarship donors. I understand my full application is review by scholarship committee members. I also understand that the college retains the right to adjust my individual scholarship award to effectively utilize federal and college dollars. My signature authorizes the WKCTC Scholarship Office to obtain a copy of my WKCTC transcript.

Applicant Signature: _____ Date: _____

Submit application **AND** all required documentation
to the WKCTC Scholarship Office no later than March 3, 2008, 4:30 p.m.

Scholarship Office located in Carson Hall (second floor).



West Kentucky Community & Technical College (WKCTC) is a proud member of the Kentucky Community & Technical College System (KCTCS) and is an equal opportunity employer and educational institution.