

Scholarship Application Complete Your Degree

What high school did you (or will you) graduate from?

Applicant Information			
Name			
Address I			
City, State, Zip	Home Phone		
I am a legal resident ofCounty.	Cell Phone		
Date of Birth			
Does your father have a degree or certification beyond a high	gh school diploma? Yes No		
If yes, what (associate, bachelors, etc.)?			
Does your mother have a degree or certification beyond a h	nigh school diploma? Yes No		
If yes, what?			
Do you have any siblings who have attended/are attending	college? Yes No		
Please specify your ethnicity or race:			
White Mixed Race			
Hispanic or Latino Other:			
Black or African American			
Are you single? Married?			
Do you have any children? Yes No If yes, how ma	ny?		
, , , , , , , , , , , , , , , , , , , ,	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) money to help pa	y bills? Yes No		
If yes, please explain:			
Have you ever worried about having enough to eat?	Yes No		
High School Data			

Graduation Date	Community Foundation Scholarship Application, Page 2 Cumulative GPA (based on 4.0 scale)				
Extra-curricular activities (athletics, clubs, etc.)					
Post-Secondary School [Data				
I plan to attend St. Clair County Community	College.	Yes	No		
If yes, when					
Intended Major		Intended Minor			
College Credit hours completed		College GPA			
What are your college/career plans? What i	nspired you	to follow this path? _			
Educational Expenses					
Estimate your total expenses for the academic y	/ear \$				
How much will you be able to provide?	\$				
How will you acquire this amount? (savings, em	ployment, oth	ner scholarships, etc.) _			
Have you sent in your application for FAFSA? If yes, what is your EFC?			Yes	No	
Are you eligible for the State of Michigan Tuition	Incentive Pro	ogram (TIP)?	Yes	No	
I certify that my application and accompanying r	naterials are	true and correct to the b	est of my ability.		
I understand that my signature verifies that I (no accompanying materials.	t a parent, fri	end, counselor, etc.) ha	ve completed this app	lication and the	
Name			Date		

Additional Requirements

The following must be returned along with this application to the Community Foundation of St. Clair County.

- Copy of High School, High School equivalency, or College (if applicable) transcripts
- 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? (Financial, transportation, housing, etc.)
 - o Do you have any other financial/family situations that you would like us to be aware of?