



AEA/ESP SCHOLARSHIP APPLICATION

The Wallace Community College Foundation will provide a Spring Term 2009 scholarship to a student attending the Dothan Campus or Fort Rucker Center who meets the following qualifications and requirements. This scholarship is sponsored by the local Alabama Education Association/Education Support Professionals membership and will pay up to \$500 for tuition, fees, and/or books.

Qualifications

- Applicant must have successively completed at least one semester at WCC.
- Applicant must have a cumulative 3.0 GPA or higher.
- Applicant should intend to graduate from WCC.
- Applicant should be able to demonstrate financial need by completing the attached form.
- Recipient must register for at least 12 credit hours.
- **All funds will be paid directly to the College on behalf of the successful applicant.**

Note: The scholarship committee will consider all applications and select the appropriate applicant who best meets or exceeds the criteria. If there are no qualified applicants, the scholarship will not be awarded.

All applicants, successful or unsuccessful, will be notified by mail on or before December 19, 2008.

Requirements: (Please include all information in a single packet and turn as requested below)

Name _____ Date _____

Address _____ City/State/Zip _____

Student # _____ Phone _____

Program of Study _____ E-Mail _____

To this application form, please staple together all items listed below and return as one package. Materials which are received late or which are incomplete will disqualify the application from consideration.

- College transcript (a copy is sufficient)
- Two letters of recommendation (do not include family members)
- A short essay, no more than one page, outlining career plans and how this scholarship could help you achieve your goals.
- **Application deadline is November 21, 2008.** Mail or hand carry all documents to:

AEA/ESP Scholarship
Financial Aid Office
Wallace Community College
1141 Wallace Drive
Dothan, AL 36303

If you require any special accommodations under ADA, please let us know.

**FINANCIAL INFORMATION FOR
AEA/ESP SCHOLARSHIP**

NAME _____ DATE _____

STUDENT NUMBER _____ AGE _____

MARITAL STATUS: Single _____ Married _____

NUMBER OF DEPENDENTS (including yourself) IN HOUSEHOLD AND THEIR AGES AND RELATIONSHIP TO YOU _____

ARE YOU EMPLOYED: No ___ Yes: Full-time _____ Part-time _____

IF EMPLOYED, WHERE _____

IF MARRIED, DOES SPOUSE WORK: No _____ Yes: Full-time _____ Part-time _____

SPOUSE'S EMPLOYER _____

APPROXIMATE MONTHLY HOUSEHOLD INCOME AND EXPENSES: (If you are considered a dependent of your parents, please include their information also)

	<u>Your Information</u>	<u>Parents Information</u>
Salary	_____	_____
Government Support (ADC, Food Stamps, SS, etc.)	_____	_____
Parental Support	_____	_____
Other	_____	_____
TOTAL INCOME	_____	_____

MONTHLY HOUSEHOLD EXPENSES:

Rent or House Payment	_____	_____
Utilities and Telephone	_____	_____
Medical Expenses	_____	_____
Food	_____	_____
Child Care	_____	_____
Entertainment	_____	_____
Monthly Installments (Loans/credit cards):	_____	_____
	_____	_____
	_____	_____
TOTAL EXPENSES	_____	_____

HOW MUCH ASSISTANCE FROM THE FOLLOWING SOURCES WILL YOU BE RECEIVING FOR THE SEMESTER IN WHICH YOU ARE APPLYING FOR THE AEA/ESP SCHOLARSHIP?

Pell Grant _____

Work Study _____

Scholarships _____

VA _____

Other _____

HAVE YOU APPLIED FOR A PELL GRANT FOR THIS SEMESTER? _____

IF YES, APPLICATION DATE _____

WILL YOU NEED ASSISTANCE NEXT SEMESTER? Yes _____ No _____

PROGRAM OF STUDY _____ **NUMBER OF HOURS PLANNING TO TAKE** _____

LAST SEMESTER ATTENDED _____ **NUMBER OF SEMESTERS REMAINING** _____

CUMULATIVE GRADE POINT AVERAGE _____

PROJECTED GRADUATION DATE _____

WHAT ARE YOU APPLYING FOR? TUITION _____ BOOKS _____

1. WHY ARE YOU IN FINANCIAL NEED? (Be Specific)

2. WHAT ARE YOU DOING TO OVERCOME YOUR FINANCIAL SITUATION?
