



# 2021-2022 Scholarship Application (Deadline April 1<sup>st</sup>)

A complete scholarship packet consists of the following documents:

- Completed TSCC Scholarship Application -- **Incomplete packets will not be accepted**
- Copy of GED, High School transcript and/or College transcript(s)
- Three (3) signed letters of recommendation on official letterhead (Example: from principal, counselor, teacher, minister and/or employer). Letters from family members or friends will not be accepted.
- Five-Hundred (500) word essay (typed) regarding your career goals and why you should be considered for a scholarship
- Resume including work experience and community service

Please select the scholarship for which you are applying:

- H. Councill Trenholm State Community College Institutional** scholarships are awarded to GED recipients, high school graduates and first-time Trenholm State students with a minimum 2.50 Cumulative Grade-Point Average (CGPA).
- Career Technical** scholarships are available to high school students with a 2.50 Cumulative Grade-Point Average (CGPA) who are recommend by a CTE director of a career technical center.
- Achievement** scholarships are awarded to currently enrolled and returning students at the College who have earned a minimum of 12 full-time credit hours with a minimum 3.50 Cumulative Grade-Point Average (CGPA).

### Personal Information:

Name: First \_\_\_\_\_ Middle \_\_\_\_\_  
 Last \_\_\_\_\_ Maiden \_\_\_\_\_  
 Student ID #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Address: \_\_\_\_\_ Apt # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_  
 Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_  
 E-mail Address \_\_\_\_\_ Are you a Citizen of the United States? \_\_\_\_\_

### Educational Information:

Date of High School Graduation (if applicable): Month \_\_\_\_\_ Year \_\_\_\_\_  
 Name of High School: \_\_\_\_\_  
 High School GPA: \_\_\_\_\_  
 Date of GED (if applicable): Month \_\_\_\_\_ Year \_\_\_\_\_  
 Have you previously attended another college? \_\_\_\_ Yes \_\_\_\_ No Name of College(s): \_\_\_\_\_  
 Intended Major at Trenholm State: \_\_\_\_\_  
 Are you currently receiving a scholarship or other assistance from any other source(s) \_\_\_\_ Yes \_\_\_\_ No  
 If yes, please name the source(s) providing financial assistance \_\_\_\_\_

SIGNATURE OF APPLICANT	DATE
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Mail the completed Scholarship Application packet by April 1<sup>st</sup> to the following address:

Office of Financial Aid  
 Trenholm State Community College  
 Post Office Box 10048  
 Montgomery, Alabama 36108  
 OR

Email to: [scholarships@trenholmstate.edu](mailto:scholarships@trenholmstate.edu)