

Citizens for Progress Scholarship

Name: _____ Social Security No. _____
Last First MI

Permanent Address: _____
Street City State Zip Code

Telephone No. (____) _____ Cell Phone No. (____) _____

Date of Birth: _____ E-mail Address: _____

Gender: ____ Male ____ Female Date of Warren County Residency: _____
Month Day Year

U.S. Citizen: ____ Yes ____ No
____ No, but am an eligible non-citizen. Registration #A _____

Date of Graduation: _____ Name of High School: _____

Highest Composite Score: ACT _____, Date _____; or, SAT I _____, Date _____

Unweighted High School GPA _____ on a 4.0 scale.

Expected Aid Amount: _____ Pell _____ Lottery

Type of Discount Form expected, if applicable _____
(example: Teacher or State Discount Form)

Other Scholarship(s) amount expected & Name of Donor(s) _____

Number of semesters in which you have received Citizens for Progress previously _____

Collegiate GPA _____

A letter of appreciation MUST be included with this application.

Release of Information Agreement:

As a recipient of a Citizens for Progress Scholarship, I, _____,
Authorize Citizens for Progress to use my name, photograph, and general information about me in
public and media relations campaigns.

This agreement is valid throughout the student's participation in Citizens for Progress Scholarship
Program or until the agreement is revoked by the student.

Student Signature Date
Name: _____ Social Security No. _____
Last First MI

To be completed each term by the appropriate admissions officer who forwards to the business officer for signature.

Attach student schedule.

This student is a new applicant and therefore does not have a postsecondary GPA.

Semester Award Amount: \$ _____

I have reviewed the foregoing information in this application and certify, to the best of my knowledge, that all information contained in this application is accurate and complete. Finally, I certify the applicant is eligible for enrollment at the postsecondary institution listed above.

Director, Motlow McMinnville or TTC

Date

Director, Admissions

Date

Business Office Signature

Date