

Scholarship Application  
Complete Your Degree

Applicant Information

Name \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

I am a legal resident of \_\_\_\_\_ County. Cell Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_

Does your father have a degree or certification beyond a high school diploma? Yes No

If yes, what (associate, bachelors, etc.)? \_\_\_\_\_

Does your mother have a degree or certification beyond a high 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 many? \_\_\_\_\_

Do you have reliable transportation to the campus? 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 pay bills? Yes No

If yes, please explain: \_\_\_\_\_

Have you ever worried about having enough to eat? Yes No

High School Data

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

Graduation Date \_\_\_\_\_ 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 inspired you to follow this path? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## Educational Expenses

Estimate your total expenses for the academic year \$ \_\_\_\_\_  
 How much will you be able to provide? \$ \_\_\_\_\_  
 How will you acquire this amount? (savings, employment, other scholarships, etc.) \_\_\_\_\_  
 \_\_\_\_\_

Have you sent in your application for FAFSA? Yes No  
 If yes, what is your EFC? \_\_\_\_\_  
 Are you eligible for the State of Michigan Tuition Incentive Program (TIP)? Yes No

I certify that my application and accompanying materials are true and correct to the best of my ability.  
 I understand that my signature verifies that I (not a parent, friend, counselor, etc.) have completed this application and the accompanying materials.

\_\_\_\_\_  
 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.)
  - Do you have any other financial/family situations that you would like us to be aware of?

Applications can be mailed to 500 Water Street, Port Huron, MI 48060  
 Or emailed to aimee@stclairfoundation.org