ASHTABULA COUNTY TECHNICAL & CAREER CAMPUS STUDENT SCHOLARSHIP APPLICATION

Student Name		Career Technical Program
Street Address	City	Telephone
Mailing Address (if different)		Home School
Where do you plan to attend p	postsecondary tra	aining?
Accepted? If not, ex	plain	
Annual Tuition \$ Esti	imated other exp	enses per year
Number of years in program _		
Will you live on Campus?	Apartmer	nt? At home?
Describe your vocational, edu	cational, and car	eer goals
What experiences, jobs, achie help you qualify for a scholarsl		s, and circumstances can you relate that would
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List other financial sources app	olied to (or that y	ou expect to apply to)
What are you parents combine	ed annual incom	e?\$

What is **YOUR** monthly income? \$______

How many total people live in your household?

List their ages _____

Are there any financial hardships or difficulties that should be considered? (high bills, other family members in college, unusual repairs, children you are supporting, etc.)

What other sources of funds do you have access to and their amounts: i.e. Social Security, Welfare, Child Support, Death Benefits, Insurance Funds, Trusts or other accounts.

Please provide the following information with this completed application: I. Transcript of credits from home schools and most recent A-TECH grade report of all applicants will be provided by the A-TECH counselors. II. Three letters of recommendation. Include one from your career technical instructor or counselor. No relatives. Please return these completed forms to Mrs. Daubenspeck in the Student Services Office by April 1.

Amount of Scholarship \$_____

Signatures of Committee Members:

_____ Date