



SOUTHWEST GEORGIA TECHNICAL COLLEGE FOUNDATION, INC.

SCHOLARSHIP APPLICATION

To be considered for a scholarship you must return this completed form to the Director of Financial Aid or the Office of Institutional Advancement Southwest Georgia Technical College 15689 U.S. Highway 19 North Thomasville, Georgia 31792

- (1) A SEPARATE APPLICATION AND SUPPORTING MATERIALS MUST BE SUBMITTED FOR EACH SCHOLARSHIP FOR WHICH YOU ARE APPLYING.
(2) SCHOLARSHIP APPLICANTS ARE RESPONSIBLE FOR SUBMITTING ALL SUPPORTING MATERIALS, INCLUDING TRANSCRIPTS.
(3) INCOMPLETE APPLICATION PACKETS WILL AUTOMATICALLY BE DENIED.

NAME OF THE SCHOLARSHIP YOU ARE APPLYING FOR: _____

Name _____ SSN _____ / _____ / _____

Address _____

City _____ State _____ County _____ Zip _____

Telephone (____) _____

Optional: Age _____ Sex _____ Marital Status _____ Race _____

Number of Dependents _____

High School _____

Special Awards _____

Program You Plan To Enter _____

Date of Entrance _____ Admissions Status _____

Will You Be Receiving Other Types of Aid? [] Yes [] No If Yes, Please List _____

Will You Be Working While Attending Classes? [] Yes [] No

Full Time: [] Yes [] No Part Time: [] Yes [] No

Estimated Amount You Will Need To Attend SWGTC _____

Do You Plan To Live In This Area After Completing Your Program? [] Yes [] No

What Are Your Career Plans and Goals? _____

Please List Three References With Addresses (Not Family Members)