

# PENSACOLA STATE COLLEGE FOUNDATION SCHOLARSHIP APPLICATION

(Please print in ink or type)

Name of Scholarship for which you are applying:	
Return Completed Application to:	Deadline:

## PERSONAL DATA

**Social Security Number:**

- Federal legislation relating to the Hope Tax Credit requires that all postsecondary institutions report student SSNs to the Internal Revenue Service (IRS). This IRS requirement makes it necessary for Pensacola State to collect the SSN of every student. **A student may refuse to disclose his/her SSN for this purpose, but he/she may be subject to IRS penalties.**
- The Florida public school system uses the SSN as a student identifier. It is beneficial to have access to the same information for purposes of tracking and assisting students in the transition from one educational level to the next, linking all levels of the state education system. The intent is to establish a comprehensive management database of information which will co-reside with the Division of Public Schools Information Database and the State University System Database to provide integrated information at the state level for educational decision-making.
- SSNs appear on official transcripts and are used for business purposes in accordance with parameters outlined by the U.S. Department of Education.

Last Name:	First:	MI:
Mailing Address:		
City:	State:	Zip:
Home Phone: (    )		Work: (    )

## EDUCATIONAL STATUS

High School:		Graduation Date:	
GED:	Date:	State:	Number:
College(s) previously attended			
1.	State:	Dates:	
2.	State:	Dates:	
What is your cumulative (overall) grade point average?			
What program of study are you pursuing at Pensacola State?			
What degree are you pursuing at Pensacola State?    A.A. <input type="checkbox"/> A.S. <input type="checkbox"/> Vocational Certificate <input type="checkbox"/>			
What is your date of expected graduation from Pensacola State?			

## FINANCIAL STATUS

Have you applied for financial aid (student loans, grants, work-study)?		Yes	No
Are you currently a recipient of financial assistance from other sources or agencies?		Yes	No
If Yes:			
Type of Financial Aid/Scholarship	Award Date(s)	Semester Award(s)	Award Amount

Please explain why you should be the recipient of this scholarship.

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Use additional paper if needed.

Please list any volunteer work, leadership positions, extracurricular activities, honors, or awards you may have received within the last two years. Please be specific if it pertains to your chosen area of study.

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Use additional paper if needed.

Are you currently employed?    Yes            No
If yes, please list weekly hours worked:

I hereby declare that I meet all minimal eligibility requirements to be considered for this scholarship. The information provided on this scholarship application is complete and accurate to the best of my knowledge.

I hereby authorize and request the release of academic and financial information to scholarship review committee members. I understand that this information will be used for the purposes of determining eligibility for the stated scholarship. I also understand that this application is for departmental consideration only.

Signature:	Date:
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Demographic information may be required for State and Federal Reports.

- Male       Female  
 White     Hispanic     American Indian     African American     Asian/Pacific Islander

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

*This application is for departmental use only. All other applications for Pensacola State College scholarships must be made through the Pensacola State College Financial Aid Office*

