



SOUTHERN SCHOLARSHIP

APPLICATION DEADLINE: April 15, 2018

Student Section:

Name:	Telephone:	
Social Security Number:	Date of Birth:	
Mailing Address:		
	Yes	No
ARE YOU RECEIVING OTHER SCHOLARSHIPS THAT ARE TUITION SPECIFIC?	<input type="checkbox"/>	<input type="checkbox"/>
HAVE YOU ATTENDED, OR ARE YOU CURRENTLY ATTENDING ANY EDUCATIONAL INSTITUTION FOR CREDIT OR TRAINING BEYOND HIGH SCHOOL?	<input type="checkbox"/>	<input type="checkbox"/>
ARE YOU CURRENTLY ENROLLED AND/OR ATTENDING SOUTHERN?	<input type="checkbox"/>	<input type="checkbox"/>
HAVE YOU APPLIED FOR FEDERAL ASSISTANCE THROUGH THE FAFSA?	<input type="checkbox"/>	<input type="checkbox"/>
<p>I AUTHORIZE SOUTHERN WEST VIRGINIA COMMUNITY & TECHNICAL COLLEGE TO VERIFY ALL INFORMATION CONTAINED IN THIS APPLICATION. ANY INSTITUTION, AGENCY OR INDIVIDUAL MAY RELEASE INFORMATION TO THE COLLEGE FOR VERIFICATION PURPOSES. IT IS MY RESPONSIBILITY TO INFORM THE FINANCIAL AID OFFICE OF ANY SCHOLARSHIPS, GRANTS, OR WAIVERS RECEIVED BY ME.</p>		
_____ Signature	_____ Date	

Counselor Section:

I, _____ at _____ Verify that _____ <small>(Name of Counselor) (Name of High School) (Name of student)</small>		
will graduate _____ With a cumulative GPA _____ <small>(Date of Graduation)</small>		
Award Ceremony Location	Award Ceremony Date	Award Ceremony Time
_____ Signature of HS Counselor		_____ Date

RETURN APPLICATION TO: SWVCTC, ATTENTION: FINANCIAL AID, PO BOX 2900, MOUNT GAY, WV 25637
 OR FAX: 304-792-7113 ****This application must have High School Transcript attached****

FIND YOUR DIRECTION!

For more information visit us online at southernwv.edu

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