

HIGHLAND COMMUNITY COLLEGE FOUNDATION

College Now

2018-2019

SCHOLARSHIP APPLICATION

1. Applications will be recognized from students who have a letter of acceptance from their College Now Advisor or are currently in the College Now program at Highland Community College. (Letter of acceptance **must be** attached)
2. The scholarship consists of four - \$2500 award for the student’s academic year at Highland. (Half of the award will be issued in the fall with the remaining half issued in the spring after confirmation of standards of academic progress).
3. Must have financial need and submission of 2016 Income Tax return **must be** attached.
  - a. 1040 or 1040A/1040EZ’s (copy of page one)
4. Only full-time students attending Highland from the following school districts are eligible: Dakota, Forreston, Le-Win, Orangeville, Pearl City, Warren, and Home Schooled.

**FILING DEADLINE: June 1, 2018**

*Please print or type clearly. Use extra paper if necessary.*

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Town/State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

Your High School: \_\_\_\_\_

High School Grade Point Average (GPA): \_\_\_\_\_

Your major/academic interest: \_\_\_\_\_

Age of Parent 1: \_\_\_\_\_

Age of Parent 2: \_\_\_\_\_

Number of Family Members in Household: \_\_\_\_\_

Number of Family Members in College: \_\_\_\_\_

Please list the extracurricular and community activities in which you have been involved in.

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Please list any awards or special recognition you have received.

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In a brief paragraph, write about your educational and vocational goals.

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Please staple an **UNOFFICIAL** copy of your most recent transcripts (college, high school, etc.) and a copy of your ACT scores (if applicable) to your application. Unofficial copies of Highland transcripts **MUST** be obtained/requested from the Admissions and Records Office; transcripts printed from ROAR will **NOT** be accepted.

I authorize Highland Community College to release my financial information and other academic records to the HCCF Scholarship review committee for purposes that may be used to determine eligibility for all scholarships.

Applicant's signature \_\_\_\_\_

Date: \_\_\_\_\_

Return completed application to: HIGHLAND COMMUNITY COLLEGE FOUNDATION  
2998 W. PEARL CITY ROAD  
FREEPORT, IL 61032  
815.599.3413