

HIGHLAND COMMUNITY COLLEGE FOUNDATION

**RICHARD AMES MEMORIAL COMPUTER SCIENCE  
SCHOLARSHIP**

2025-2026

APPLICATION

1. Applications for this scholarship will be accepted from a freshman or sophomore who will be attending HCC as a full-time student.
  
3. Criteria:  
Academics:
  - a. 2.5 GPA or better
  - b. Students must be interested in Computer Science or related fields.
  - c. Student must be able to attend the annual Scholarship Award Ceremony.
  
4. Financial need may be a consideration  
A copy of the Student Aid report (SAR) or a copy of a completed Financial Aid Application (FAFSA) must be on file at the Highland Community College Financial Aid Office for the school year of the application.

*A written thank you letter to the donor will be required before award is applied to your account. Letters should be sent c/o HCC Foundation, 2998 W Pearl City Road, Freeport IL 61032 or emailed to [foundation@highland.edu](mailto:foundation@highland.edu)*

**FILING DEADLINE: April 1, 2025**

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

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

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

County: \_\_\_\_\_ Telephone: \_\_\_\_\_

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

Your High School: Year Graduated: \_\_\_\_\_ Received GED: \_\_\_\_\_

Employer: Hours Per Week: \_\_\_\_\_  
over \_\_\_\_\_

## HIGHLAND COMMUNITY COLLEGE FOUNDATION

Have you decided yet on the college or university to which you would like to transfer after HCC?  
If so, please give the name and location: \_\_\_\_\_

Have You Applied for Admission to Highland? Yes \_\_\_\_\_ No \_\_\_\_\_

Your Educational Goal: Associate Degree \_\_\_\_\_ Bachelor Degree \_\_\_\_\_  
Masters Degree \_\_\_\_\_ Doctoral Degree \_\_\_\_\_

Your Major: \_\_\_\_\_

In a brief essay, write about your education goals and how this scholarship would help you financially.

Please staple an **UNOFFICIAL** copy of your most recent transcripts (college, high school, GED, etc.). 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 RD.

FREEPORT, IL 61032

815.599.3413