

**HGKAB**

H                    **HIGHLAND COMMUNITY COLLEGE FOUNDATION**  
                         **H.G. KABLE MEMORIAL SCHOLARSHIP**  
                         2024-2025  
                         APPLICATION

This scholarship consists of an award with varying amounts dependent on part-time or full-time status (awarded on a per-semester basis) for enrollment at Highland Community College.

Applications for this scholarship will be accepted from freshmen or sophomore students who will be attending Highland next fall.

- A. Preference to a graduate of Forreston High School, Mt. Morris, or Oregon High School; with second preference being a student residing in the HCC district.
- B. Financial Need is a consideration

*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, 2024**

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: \_\_\_\_\_

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

Are you currently working? Yes \_\_\_\_\_ No \_\_\_\_\_ Hours per week: \_\_\_\_\_

If yes, where? \_\_\_\_\_

Have You Applied for Pell Grant/State Scholarship? Yes \_\_\_\_\_ No \_\_\_\_\_

College or University Where You Plan to Transfer: \_\_\_\_\_

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

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

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

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Please list the extracurricular and community activities which you have been involved in: i.e., sports, newspaper, science, math club, computer science, etc.:

Please list any awards or recognition you have received.

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

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 ROAD  
FREEPORT, IL 61032  
815.599.3413**