

OMALIA

HIGHLAND COMMUNITY COLLEGE FOUNDATION EUNICE O'MALIA MEMORIAL SCHOLARSHIP

2024-2025
APPLICATION

This scholarship consists of an award (amount may vary depending upon available income) to be used for tuition, books or related expenses (awarded on a per-semester basis) for enrollment at Highland Community College.

Applications for this scholarship will be accepted from students who will be sophomores at Highland next fall. (Award contingent on sophomore status.)

Priorities for selection:

- A. Student must be in sophomore year (32 credit hours or more).
- B. Student must be full-time and live in the HCC district.
- C. Minimum GPA of 3.0
- D. Financial Need:
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

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: _____

College Grade Point Average (GPA): _____

Employer: _____

Your major/academic interest: _____

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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