

HIGHLAND COMMUNITY COLLEGE

**WOMEN’S EDUCATION FUND  
SCHOLARSHIP APPLICATION  
2025-2026**

The Women’s Education Fund is underwritten by individual members of the 3 Freeport chapters of PEO, which are BE, LI, and IY.

The Women’s Education Fund sponsors annual scholarships for non-traditional women students pursuing higher education at Highland Community College.

The scholarships are available for the fall semester.

Priorities for selection:

- A. Preference to "non-traditional" female student. A “non-traditional” student is defined as a student who has not continued their education immediately following high school.
- B. Scholarship is not available to nursing students
- C. Letter of Recommendation **must** accompany this application.
- D. Financial need is a consideration.
- E. Most recent transcripts **must** accompany this 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: June 1, 2025**

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

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

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Name(s) of spouse /parent(s) /guardian: \_\_\_\_\_

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

Applicant's high school of graduation: \_\_\_\_\_ Graduation or GED date: \_\_\_\_\_

Please list community, volunteer, or work activities in which you are presently participating:

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Future career goals:

Please list the classes you plan to take next semester and tell us about your educational goals and the degree you are seeking:

Describe your present family and economic situation and discuss how this scholarship could help you attain your educational goals. Please include information regarding any financial aid you are receiving:

Please include any other pertinent information not covered above:

I authorize the release of my financial information and other academic records to the selection committee for purposes that may be used to determine eligibility for scholarships.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**A letter of recommendation from a person (instructor, employer, or individual not related to the applicant) and the most recent transcript MUST be submitted along with this application to:**

**Highland Community College Foundation  
2998 W. Pearl City Rd.  
Freeport, IL 61032  
815-599-3413**

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