

HIGHLAND COMMUNITY COLLEGE FOUNDATION

ANONYMOUS DUAL CREDIT SCHOLARSHIP

2024-2025

APPLICATION

This scholarship consists of an award for a Freeport High School Dual Credit student enrolling at Highland Community College. The award can be used for books, tuition, or other educational expenses at Highland Community College which are not covered by Freeport High School (A minimum of 2.0 GPA or better must be maintained.) **Students must reapply to receive consideration for renewal of scholarship.**

Criteria for selection:

- A. Preference to an African American student who is currently attending **Freeport High School** that is in good standing: Academically, Behavioral, Attendance, and Community. All referrals will come from the Freeport High School Career Coach and Counselor.

Please have the school administrator or guidance counselor sign to verify eligibility.

Signature

Title

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

PRIORITY FILING DATE: 2 weeks prior to start of semester

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

Applicant's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

County: _____ Telephone: _____

Email Address: _____

Your High School: _____

Year Graduated: _____

Your major/academic interest: _____

Attach to this application an approximately 250-word essay discussing why you decided to

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pursue dual credit and your chosen major or goal and your plans to attain them. Must include extracurricular activities, community participation (volunteerism/public service/church, etc....) you have been involved in. Essays should be typed and double-spaced.

Please staple an **UNOFFICIAL** copy of your Freeport High School transcripts to your application. An **UNOFFICIAL** copy of your most recent Highland transcripts ***if applicable*** **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