HIGHLAND COMMUNITY COLLEGE FOUNDATION

NORMA JEAN DAVIS SCHOLARSHIP

2025-2026 APPLICATION

The scholarship consists of an award (amount may vary depending upon available income) for the student's academic year at Highland (Half of the award will be issued in the fall with the remaining half issued in the spring after confirmation of standards of academic progress). Award may be used for books and tuition.

Applications for this scholarship will be accepted from students who will be attending Highland either part or full-time (award amount based on enrollment status).

Priorities for selection:

- A. Preference to a student with a major course of study in Music Education or General Education.
- B. Minimum 2.5 GPA on a 4.0 scale.
- C. Financial need shall be a consideration.
- D. No geographical limitation on the residence of the students.

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 2025

| Please print or type clearly. Use extra | a paper if necessary. | | | | | |
|---|-----------------------|------|--|--|--|--|
| Applicant's Name: | | | | | | |
| Address: | Town/State: | Zip: | | | | |
| | Telephone: | | | | | |
| Email Address: | | | | | | |
| Your High School: | | | | | | |
| Year Graduated: | Received GED: | | | | | |
| Are you employed and where? | | | | | | |
| Your major /academic interest: | | | | | | |

| DAVIS |
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| Please provide a short essay describing your educational goals and desires, including which degree you are pursuing, why you chose this degree and what your future plans are. |
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| 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