



Advanced Manufacturing Computer Integrated Machining Scholarship Application

SCHOLARSHIP DEADLINE
Thursday January 4th, 2018

CONFIDENTIAL INFORMATION

South Central College is asking you to provide private information in order to process your registration form. This information will be used to update your academic record. You are not legally required to provide this information; however, the college may not be able to effectively process your request if you do not provide sufficient information. Access to this information will be limited to school officials, including faculty who have legitimate educational interests in this information. Under certain circumstances, federal and state laws authorize release of private information without your consent; to other schools in which you seek or intend to enroll, or are enrolled; to federal, state, or local officials for purposes of program compliance, audit or evaluation; as appropriate in connection with your application for, or receipt of financial aid; if the information is sought with a court order or subpoena; or as otherwise permitted by other state or federal law.

Applicant: Please check SCC campus you're attending

Faribault
North Mankato

Last Name First Name Middle Initial Social Security Number or SCC Student ID Number

Address City State Zip County of Permanent Residence

E-mail Address _____

Telephone Number: _____ High School/GED _____

Please answer the following questions, highlighting your experiences, skills, and abilities, to assist in the award selection process.

1) GOALS AND ASPIRATIONS

- A. What is your anticipated program of study?
 - Computer Integrated Machining

- B. Why did you choose the program in which you are enrolling?

2) WORK EXPERIENCE

A. List most recent employer(s) and dates of employment:

B. Is your current employer helping to fund your training? YES or No

If yes, please provide details.

3) ADDITIONAL INFORMATION

Why should you be selected to receive a scholarship?

What else would you like the Scholarship Committee to know about you?

REQUIRED ACADEMIC INFORMATION

By completing and submitting this application, I authorize the scholarship committee to review my student record, which includes, but is not limited to, financial aid information, current academic transcript, and prior high school and college transcripts. I certify that the information submitted is correct.

If I am awarded a scholarship,

- I understand my name and photo may be used on SCC's website in SCC publications and/ or foundation publications in addition to SCC's papers of record: (*Mankato Free Press* and the *Faribault Daily News*) and other hometown newspapers unless I have a signed *Confidential List Form* on file with the SCC Student Affairs Office.
- Additionally, I understand that must be enrolled and complete a minimum of 6 credits in the semester in which an award is provided to me.
- Finally, I understand that if I am a North Mankato Campus student, I must attend a 30 minute scholarship workshop and the award ceremony on Friday, August 25 from 11:30-1:50 p.m.

Applicant's Signature

Date

Return the application to:

FARIBAULT:
ATTN: Student Affairs
SCC Faribault Campus
1225 Third Street SW
Faribault, MN 55021
Phone: 507-332-5808

NORTH MANKATO:
ATTN: Student Affairs
SCC North Mankato Campus
1920 Lee Boulevard
North Mankato, MN 56003
Phone: 507-389-7342