

**Otha Grimes/Francis Tuttle
Memorial Scholarship**

**for Adult Career and
Technology Center Students**

Revised 01/08/2020



Application

Spring

Fall

**PLEASE COMPLETE APPLICATION AND SUBMIT TO FINANCIAL AID DIRECTOR BY
SCHOOL'S DEADLINE. APPLICATION MUST BE TYPED.
(DO NOT COPY A PREVIOUSLY SUBMITTED APPLICATION)**

Name: _____

Address: _____
(Street) (City) (State) (Zip)

Home Phone Number: _____ **Cell Number:** _____

Technology Center (please include campus): _____

Is the applicant attending technology center as an in-district or out-of-district student?

Program in which applicants is enrolled: _____

Date applicant started in the program: _____

Date applicant plans to complete the program: _____

Name of the instructor who can document applicant's program endeavors: _____

Define your career objective:

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What circumstances dictate your financial need for scholarship assistance (please be specific):

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**List all educational expenses (specify the item and cost of each item for the current semester):
(Only list allowable scholarship expenses, refer to guidelines)**

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
	(total expenses)

**List all financial support you have or plan to receive this semester:
(Pell or other scholarships – specific the support and amount)**

_____	\$ _____
_____	\$ _____
_____	\$ _____
	(total support)

**Total amount of scholarship funds you are requesting this semester:
(Note: Application will NOT be considered unless amounts are indicated.)**

\$ _____

I hereby certify that the above information is correct to the best of my knowledge, and that I am at least 18 years of age. Incomplete information may jeopardize this application from being considered.

Date

Applicant's Signature

Scholarship must be applied towards students' specific needs identified above.
(Applicant may attach a separate page of additional information for clarification of any item(s) in application.)