

MORaine VALLEY COMMUNITY COLLEGE
Scholarship Application

You must complete ALL fields in order for the form to be processed. Type directly onto this form, and select the "Submit by E-mail" button at the bottom of the page. If you want to keep a copy for yourself, select the "Print Form" button at the bottom of the page.

Biographical Information _____

Last Name _____ First Name _____ Middle Initial _____

Social Security Number _____

Address _____ City _____

State _____ Zip _____

E-mail Address _____

Home Phone _____ Cell Phone _____

Enrollment Plans _____

I am currently enrolled at Moraine Valley Community College.

I am NOT currently enrolled at Moraine Valley Community College.

I am currently a high school student. (High school students submitting an application must request an academic transcript be sent from their high school to Moraine Valley.)

In the next academic year, I plan to enroll in (check one):

12 or more credit hours 9 to 11 credit hours 6 to 8 credit hours

Why did you choose to enroll at Moraine Valley Community College?

Area of study you most likely will pursue at Moraine Valley Community College:

Expected date of graduation from Moraine Valley: _____

Citizen Status (check one)

U.S. citizen Permanent resident International student

Are you a resident of the Moraine Valley district? Yes No

Demographic Information _____

Are you a single parent? Yes No

Are you a returning adult (24 years of age or older)? Yes No

Have you been out of an academic setting for 10 years or more? Yes No

Moraine Valley cumulative grade point average: _____

Number of hours completed at Moraine Valley: _____

Do you have an immediate family member who is a Moraine Valley alumnus? Yes No

If yes, please provide name of family member and their relationship to you.

Are you currently utilizing, or have you ever utilized, the Center for Disability Services? ___ Yes ___ No
If yes, in what capacity?

Do you currently receive any financial aid? ___ Yes ___ No
If yes, what type(s):

Explain clearly why you are in need of this scholarship. Include your financial and family obligations and any special circumstances.

Are you presently employed? ___ Yes ___ No
If so, where and how many hours:

Your career goal is:

Indicate any extracurricular activities, community work, and academic achievements you have participated in or received while in high school and/or college.

Additional Information and Personal Statement _____

Please provide additional information for consideration. Please be concise. Limit your statement to 500 words. This statement will become a key part of your scholarship application and will be read carefully by the scholarship committee.

Signature: _____ Date: _____

By signing, I certify that the information in the application is accurate. I hereby give Moraine Valley Community College permission to release information about my major, grade point average, enrollment status, course work completed, and other similar eligibility criteria plus my essay, if applicable, to those involved in the scholarship selection process.

You must complete ALL sections in order for the form to be processed. Print, complete, and mail the form to Financial Aid Office, Moraine Valley Community College, 9000 W. College Pkwy., Palos Hills, IL 60465-2478. Or you can drop off the completed form to the Financial Aid Office in Building S, Room S107.