



444 Green Street, Gardner, MA 01440-1000

**Scholarship Deadlines:** March 10<sup>th</sup> - Upcoming Fall and Spring Semester

**IMPORTANT: TYPE OR PRINT CLEARLY**

Student Name (Last, First Middle): \_\_\_\_\_

MWCC ID Number (**Please do not leave blank**) \_\_\_\_\_ Age: \_\_\_\_\_

Permanent Home Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work or Cell Phone Number: (\_\_\_\_) \_\_\_\_\_

Gender: \_\_\_\_\_ Ethnic Background (**Optional**): \_\_\_\_\_ US Citizen (circle one): Yes or No

State of Residence: \_\_\_\_\_ County: \_\_\_\_\_ Estimated Graduation Month/Year: \_\_\_\_\_

Semester/Year you first enrolled at MWCC: \_\_\_\_\_ Academic Major/Minor: \_\_\_\_\_

Are you a Veteran of the US Armed Forces? \_\_\_\_\_ If yes, which branch: \_\_\_\_\_

Grade Point Average: \_\_\_\_\_ Credits Earned: \_\_\_\_\_ Name of Your Academic Advisor: \_\_\_\_\_

Are you enrolled in Honors Program? \_\_\_\_\_ Are you involved in any co-curricular programs? \_\_\_\_\_

\*\*\*\*\* *Please be advised that your MWCC academic transcript will be accessed for the purpose of reviewing eligibility for a scholarship.* \*\*\*\*\*

**TRANSFER:**

Have you been accepted to the four year institution? \_\_\_\_\_ If so, where? \_\_\_\_\_

Are you transferring to a four year college next semester? \_\_\_\_\_ If you qualify for joint admission, have you filed the "Intent to Enroll" form? \_\_\_\_\_

**List and explain your involvement in student life or student activities on campus:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Describe any community service program or volunteer work in which you have participated, including a specific number of hours if you know them:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Briefly describe your career/professional goals:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**List and/or explain any Honors or Special Recognition Received:**

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**Write (type) and attached to this application an essay answering the following two questions:**

1. What does MWCC mean to me?
2. In what ways will I or have I contributed to the quality of life at MWCC?

**Provide two letters of recommendation:**

One from a faculty member and one from an employer or community service administrator who is personally familiar with your work.

List the names and titles of the two recommendations: \_\_\_\_\_

\_\_\_\_\_

**I certify that the information reported on this application is accurate and correct to the best of my knowledge. By signing this application, I hereby give the MWCC Financial Aid and Records Offices permission to release information concerning my academic history and financial need eligibility to the MWCC Scholarships Committee for the purpose of evaluating my eligibility for a scholarship.**

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Student Name** \_\_\_\_\_

**Submit this application, your essay and two letters of recommendation to the Financial Aid Office.**

**IMPORTANT NOTE:** The Financial Aid Office does not determine qualifying recipients. Scholarship awards are determined by the donor or sponsoring agency. You will be notified by mail, only if you qualify for a scholarship. Scholarship awards are based on different criteria set forth by the donor or sponsoring agency.

For specific information regarding MWCC available scholarships please log on to:

<http://www.mwcc.edu/catalog/financialaid.html#scholarships>

For an online version of this scholarship application please log on to:

<http://www.mwcc.edu/financial/forms.html>

Office Use Only

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