



2015-2016 Scholarship Application

This form must be completed and returned to the Financial Aid Office in a timely manner for consideration. Students must complete a 2015-2016 FAFSA to qualify for scholarships. All information must be printed clearly in ink or typed. Scholarships are typically awarded during late Fall & Spring semesters according to available funding. Incomplete or unsigned applications will not be considered.

Name _____ Student ID or SSN _____

Mailing Address _____

City _____ State _____ Zip _____

Telephone Number _____ Email _____

State of Legal Residence _____ County of Residence _____

Program of Study/Major _____ Expected Date of Graduation _____

Grade Level: 1st Year (0-32 credit hours) 2nd Year (32 credit hours or more) Grade Point Average (GPA) {current student only} _____

Gender: Male Female Veteran: Yes No

Ethnic Background: (Some scholarships are designed for specific ethnic groups. Please mark the category that applies to you.)

- African American/Black American Indian/Alaskan Asian Caucasian/White Hawaiian/Pacific Islander Hispanic Other _____

Accomplishments: Briefly describe yourself. Include any academic, community and organizational activities you are involved in.

Are you receiving other types of financial aid not awarded by ECC? No Yes: If yes, please list other aid

My signature below certifies that the information provided is true, complete and accurate to the best of my knowledge. I authorize the Edgecombe Community College Foundation to validate any information provided including but not limited to financial aid data.

Signature _____ Date _____

Application Deadline: September 25, 2015

Tarboro campus: 2009 W. Wilson St., Tarboro, NC 27886 • Phone: (252) 823-5166 • Fax: (252) 823-6817
Rocky Mount campus: 225 Tarboro St., Rocky Mount, NC 27801 • Phone: (252) 446-0436 • Fax: (252) 985-2212
www.edgecombe.edu

To be completed by ECC Personnel

This section should only be completed if a recommendation(s) from specific department personnel is being submitted.

Scholarship Name: _____

About the Student:

I recommend this student for a scholarship. I have verified that the student is in good standing in my class and in the program.

Referring Personnel Signature

Date

Financial Aid/Scholarship Committee Office Use Only

COA: _____

EFC: _____

Total Aid Awarded: _____

Federal Pell: _____

Sch./Grants: _____

Direct Loan: _____

Work-Study: _____

FA Reviewed by: _____ Date: _____