

NORTH CAROLINA STATE BOARD OF REFRIGERATION EXAMINERS 2016 SCHOLARSHIP APPLICATION

(Scholarships are awarded for the academic year, July 1 – June 30. Students should complete the application and submit to Financial Aid Officer at the Community College no later than April 1st of each year.)

Identifying Information

Full Name _____

Home Address, including City, State, Zip _____

_____ Telephone Number (_____) _____

U.S. Citizen? Yes No Are you a resident of North Carolina? Yes No If yes, how many years? _____

Educational Information

High School attended _____

Year Graduated _____ High School Grade point average _____

Community College you are currently enrolled in or plan to attend _____

Current or planned Curriculum/Major _____

Hours completed to date _____ Overall GPA _____

Are You attending current year? No Will you be enrolling: FT PT

If part time, approximately how many credit hours per term? _____

Are you currently receiving other education financial assistance? Yes No

If yes, what type? _____

Briefly explain how you plan to finance your education _____

(Parents, savings, financial aid, part time employment, other)

Semesters for which you will use this scholarship (check all that apply)

Summer 2016 Fall 2017 Spring 2017

If you currently work more than 20 hours/week, where _____

How long employed? _____ What type business? _____ Refrigeration? Yes No

Educational Accomplishments

Please briefly describe any activities in which you have been involved beyond your academic studies, i.e., awards, special programs or any other educational accomplishments

Community and Organizational Activities

Please briefly describe any activities in your community in which you have been actively involved and organizations to which you belong and actively participate

Work Career Goals

Briefly describe your career goals

Scholarship Request

In addition to the above requested information, please briefly explain why you feel you should be considered for this scholarship

I verify that the information submitted in this application is true and accurate. I agree the NC State Board of Refrigeration Examiners may publish the award of this scholarship in appropriate media outlets.

Applicant's Signature (full name)

Financial Aid Office (forward to SBRE, 889 US Hwy. 70 W., Garner, NC 27529 by 4/15/16)

Total aid awarded for enrollment \$ _____

Major _____

Tuition _____

Textbooks _____

Supplies _____

Other _____

Financial Aid Officer

Date