WORKFORCE EDUCATION SCHOLARSHIP
APPLICATION INSTRUCTIONS
2020-2021

The Weatherford College Foundation is pleased to provide scholarship funds for payment of tuition for the following Workforce career programs: Accounting/Bookkeeping & Quickbooks Certificate; Certified Nurse Aide (CNA); Computer-Aided Drafting & Design (CAD) Certificate; Computer Skills for Business Certificate; Dental Assistant; Heating, Ventilation & Air Conditioning (HVAC); Industrial Maintenance Technician Certificate; Law Enforcement Academy; Fire Academy & EMT (**Online Only**); Machining & CNC; Clinical Medical Assistant; Medication Aide; Pharmacy Technician; Truck Driving Academy; Welding Academy and; Welding Certificate; and Pipefitter Certification.

Scholarship funds cannot apply to testing fees, insurance fees, books or other additional supplies. Scholarships will be awarded throughout the year until all funds are depleted. The maximum award per person per year is up to $500. Awards may be limited depending on student qualifications, program and/or need. Applicants must be able to meet all requirements. All submitted applications **must be complete** to be considered.

⇨ **SCHOLARSHIP PROBATION:** If student does not successfully complete the program in which scholarship funding was awarded, student will be placed on scholarship probation. The student will be given one final opportunity to apply for scholarship. If student does not successfully complete scholarship funded program a second time, student will become ineligible to receive any future scholarship funding.

⇨ **Funding is subject to change each year**

PROCEDURE TO APPLY:

1. Select Workforce Education Program.
2. **Complete Workforce Education Grant (WEG) application.**
3. Complete attached scholarship application. Type or print legibly.
4. Obtain and attach two (2) Letters of Recommendation (Professional/ Non Family). Letters are preferred to be typed on offical letterhead and attached in sealed envelopes.
5. Turn in completed scholarship application with professional letters of recommendation to the Workforce Education office at Weatherford, Wise County, Granbury or Mineral Wells campus.
6. To be awarded, applicant **must** be registered for a Workforce Education Program or class.
7. **Incomplete Applications will be mailed back to applicant**.

WEATHERFORD COLLEGE
WORKFORCE EDUCATION
STUDENT SCHOLARSHIP APPLICATION

TYPE OR PRINT LEGIBLY

_____   _____   _____
LAST NAME   FIRST NAME   MIDDLE NAME

_____   _____   _____   _____   _____
STREET ADDRESS   PO BOX/APT. #   CITY   STATE   ZIP CODE

_____   _____   _____
PRIMARY PHONE NUMBER   EMERGENCY PHONE NUMBER   EMAIL ADDRESS

_____   _____   _____   GENDER:
DATE OF BIRTH   TX COUNTY OF RESIDENCE   COUNTRY OF CITIZENSHIP   ☐ MALE   ☐ FEMALE

LIST HIGH SCHOOL/GED _____   YEAR OF GRADUATION/GED _____

LIST HIGHEST LEVEL OF EDUCATION YOU HAVE COMPLETED: _____

LIST ANY CERTIFICATIONS YOU HAVE COMPLETED: _____

PLEASE LIST PROGRAM OR COURSE YOU ARE APPLYING FOR: _____

HAVE YOU COMPLETED AND TURNED IN YOUR PROGRAM PACKET?   ☐ YES   ☐ NO

HAVE YOU APPLIED FOR FINANCIAL AID (WEG)?   ☐ YES   ☐ NO

DATE WEG APPLICATION WAS SUBMITTED: _____   **Must Submit to Apply for Scholarship**

HAVE YOU BEEN AWARDED ANY OTHER TYPE OF FINANCIAL AID OR OTHER SCHOLARSHIPS SUCH AS: WIOA, VRS, LOCAL/STATE SCHOLARSHIP, WOMEN'S CENTER, ETC.?   ☐ YES   ☐ NO

IF YOU ANSWERED YES TO THE PREVIOUS QUESTION REGARDING OTHER TYPES OF ASSISTANCE, PLEASE LIST THE TYPE OF AID AND AMOUNT HERE. _____

_____

FAMILY'S ANNUAL INCOME: *(CHECK ONE)*   UNDER $50,000 $50K TO $100K   OVER $100K

HOW MANY MEMBERS IN THE FAMILY? _____

HOW MUCH FINANCIAL ASSISTANCE WILL YOU RECEIVE FROM FAMILY MEMBERS? _____

HOW DO YOU PLAN TO PAY FOR THE REMAINING COST OF YOUR PROGRAM? _____

EMPLOYMENT STATUS: ☐ FULL-TIME (35+ HRS WEEK)   ☐ PART-TIME (LESS THAN 35 HRS PER WEEK)
☐ HOMEMAKER   ☐ UNEMPLOYED

DO YOU HAVE RELIABLE TRANSPORTATION?   ☐ YES   ☐ NO

WHAT IS YOUR BACK-UP PLAN FOR TRANSPORTATION? _____

_____

DO YOU HAVE A RELIABLE SOURCE OF COMMUNICATION (CELL PHONE, EMAIL, ETC.)?   ☐ YES   ☐ NO

IF CHILDCARE IS NEEDED, DO YOU HAVE RELIABLE CHILDCARE?   ☐ YES   ☐ NO   ☐ NOT APPLICABLE

WHAT IS YOUR BACK-UP PLAN FOR CHILDCARE? _____

_____

ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THIS PROGRAM/CAREER WITHOUT
REASONABLE ACCOMODATIONS?   ☐ YES   ☐ NO   IF NO, PLEASE EXPLAIN. _____

_____

(ADDITIONAL PAGES MAY BE ATTACHED FOR THE FOLLOWING QUESTIONS.)
1. WHAT ARE YOUR CAREER/EDUCATIONAL PLANS? _____

_____

_____

_____

_____

_____

2. WHY DID YOU CHOOSE WEATHERFORD COLLEGE? _____

_____

_____

_____

_____

3. EXPLAIN IN DETAIL HOW THE RECEIPT OF THIS SCHOLARSHIP WILL ENABLE YOU TO COMPLETE YOUR EDUCATION OR IMPACT YOUR LIFE? _____

_____

_____

_____

_____

_____

4. PLEASE DESCRIBE IN DETAIL YOUR FINANCIAL NEED FOR SCHOLARSHIP ASSISTANCE OR OTHER CIRCUMSTANCES THAT MAY INFLUENCE THE COMMITTEE'S DECISION. _____

_____

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_____

_____

_____

5. PROVIDE A LIST OF HONORS, AWARDS, RECOGNITIONS, LEADERSHIP POSITIONS, CLUBS, CIVIC AND SOCIAL ACTIVITIES, OR OTHER VOLUNTEER/SERVICE ACTIVITIES. _____

_____

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Student Information:

Student Name:⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯

Program Area:⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯

Please check and attached both letters of recommendation before submitting Scholarship Application. Letters are preferred to be typed on offical letterhead, and attached in sealed envelopes.

Letter One Attached: ☐ (Please check)

Information about the person writing the recommendation:

Name & Title:⎯⎯

Employer:⎯⎯

Address:⎯⎯

Relationship to student (check one): ⎯⎯⎯Educator/Teacher ⎯⎯⎯Employer ⎯⎯⎯Job Counselor

⎯⎯⎯Volunteer Coordinator ⎯⎯⎯Other (Please explain)⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯

Letter Two Attached: ☐ (Please check)

Information about the person writing the recommendation:

Name & Title:⎯⎯
Employer:⎯⎯

Address:⎯⎯

Relationship to student (check one): ⎯⎯⎯Educator/Teacher ⎯⎯⎯Employer ⎯⎯⎯Job Counselor

⎯⎯⎯Volunteer Coordinator ⎯⎯⎯Other (Please explain)⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯