



Northeast Technology Center Foundation

Scholarship Application

P.O. Box 487
Pryor, OK 74362
918-825-7040

First Name:
Middle Initial:
Last Name:

Address:
City:
State:
Zip Code:

Phone:
Age:
Marriage Status:
Last 4 Digits of SSN:

High School Attended:
Date Graduated:

Program You Are Currently Enrolled:
Campus:
Started date:

Employer:
Hours Worked/Week:
Wage:

List Educational Expenses:

Amount you are requesting:

If Married, Spouse's Employer:
Hours Worked/Week:
Wage:

of Family Members:
Do You Live With Your Parents? Yes No

Have You Applied for or Received Scholarship(s) or Other Assistance? Yes No

If Yes, Give Name of Scholarship(s) or Other Assistance and Dollar Amount Received:

What Circumstances Dictate Your Financial Need for Scholarship Assistance:

I hereby certify that the preceding information is correct to the best of my knowledge. Incomplete information may jeopardize this application being considered.

The Applicant and Parent Legal Guardian Signature below can be typed for electronic submission. By typing the applicants name and if applicable the Parent/Legal Guardian name, you are validating your permission that you are representing yourself in accordance to this scholarship application.

Date:
Applicant's Signature:

(If Under the Age of 18) Parent or Legal Guardian Signature:

For Committee Member Use Only

Dollar Amount Approved:

Apply Amount To:

Books

Uniforms, Supplies

Other:

Approved: Yes No

Approved by Student Services Director

Date:

Approved: Yes No

Approved by Financial Aid Coordinator:

Date: