BEYONDNFCC SCHOLAR PROGRAM
North Fulton Community Charities

North Fulton Community Charities
GED Scholarship Application

Applicant Information

Please print clearly and submit this application to the NFCC VP of Client Programs for processing.

APPLICANT'S NAME: _____ **DATE:** _____

ADDRESS: _____**CITY:** _____ **STATE:** __ **ZIPCODE:** _____

DATE OF BIRTH: _____ **GENDER:** ☐ **Male** ☐ **Female**

EMAIL: _____**PREFERRED PHONE #:** _____

Education Information

1. **Are you currently enrolled in a trade or technical school, certificate program, or college?**
   ☐ Yes ☐ No

   If so, Date of Enrollment: _____

   Name of School: _____

   Address of School: _____

2. **Have you been accepted into a vocational or technical school, certificate program, or college?**
   ☐ Yes ☐ No
   If so, What is the name of the technical school or college? _____
   When do classes begin? _____
   What is the name of your college advisor? _____

3. **What is your field of study?** _____
4. **What type of advanced education do you plan to pursue?**
   ☐ Certificate Program
   ☐ Associate's Degree
   ☐ Bachelor's Degree
   ☐ Other _____

Employment and Financial Information

5. **Are you currently employed?** ☐YES ☐ NO
6. **If so, list the current employer information:**
   Name of Business: _____
   Address: _____
   Job Title: _____ Hourly Wage: _____

7. **How many are in your household?** _____

8. **Have you completed the Free Application for Federal Student Aid (FAFSA) form?**
   ☐ YES ☐ NO
   Will you be receiving financial aid? ☐ YES ☐ NO
   If so, what is the dollar amount of the grant or loan? $ _____

9. **What is the specific purpose of the NFCC GED Scholarship? (ex: tuition, books, other):**
   _____

Career Goals & Advanced Education

10. **Do you have a training/degree or certification goal? ☐ YES ☐ NO**
    Describe your goals. Be specific: _____
    What is the reason you selected this training/degree or certification goal?
    _____

11. **What is your targeted job after you complete your advanced education?** _____

Release of Information Consent/Certification & Acknowledgment

RELEASE INFORMATION FOR ELIGIBILITY **Initial Here** _____

I authorize the release of my information to the NFCC GED Scholarship Selection Committee as necessary to determine my eligibility for the NFCC GED Scholarship. I further authorize the release of information by staff necessary to secure related services and assistance on my behalf and share information with other programs from which I receive or have received services from North Fulton Community Charities. This authorization to gather information about me and share necessary and pertinent personal information about me is given with the understanding that the information will be used in a confidential and responsible manner.

RELEASE INFORMATION FOR EDUCATIONAL INSTITUTION **Initial Here** _____

I authorize the release of my current and past educational records from high schools, colleges, universities, and training schools to the College Advisor. Such records include my current/past enrollment, transcripts, attendance records, graduation/completion information, and diploma/certificate/credential attained. I understand that under the Family Educational Rights and Privacy Act of 1974 (FERPA), which is a Federal law that protects the privacy of student education records, that the College Advisor must have my written consent to obtain my educational records. I certify that this authorization of release form may be sent as a fax, email, or a photocopy presented in person with appropriate identification from the above agency's staff to the record holder.

CERTIFICATION & ACKNOWLEDGMENT **Initial Here** _____

I hereby affirm that the information provided on this application is true and complete to the best of my knowledge. I also agree that falsified information or significant omissions may disqualify me from further consideration for NFCC program activities. ***Please read carefully, initial each release/acknowledgment, sign and date.***
Applicants are responsible for ensuring that all required documentation is attached to their application. Missing documentation will delay the processing of your application.

_____ _____

Signature of APPLICANT **Date Submitted**