<u>Improving Lives</u> <u>Scholarship</u> <u>Application</u>

(unanticipated urgent financial need)

Urgent financial need scholarship requirements

Improving Lives Scholarship

This scholarship is funded through the United Way of Crawford County and the Lincoln Trail College Foundation. It is intended to help those who have unanticipated circumstances that may keep them from their pursuit of higher education at Lincoln Trail College. Exceptions to the requirements will be considered by the United Way of Crawford County board.

PURPOSE:

The IMPROVING LIVES SCHOLARSHIP is available to applicants that have been a resident of Crawford County for a minimum of 2 continuous year or can demonstrate a recent relocation to Crawford County for purposes other than attending school. Students (current or prospective) enrolling at Lincoln Trail College pursuing educational advancement in any of the following programs of study are eligible: GED, Certificate, 2 year Degree or Transfer Degree. The primary focus of this scholarship is to address the financial hurdles associated with continuing education. Preference will be given to single parents with financial needs associated with childcare/daycare expenses; however all unanticipated financial needs that are prohibiting Crawford County residents from achieving their educational goals will be considered during the awarding process of this scholarship. Award amounts will vary based on the needs of the selected candidates. In rare cases an interview may be requested.

Please include the following items and checklist with application:

Completed and **signed** Improving Lives scholarship application (See next page)

Letter of recommendation/support

Personal Letter to Foundation scholarship committee describing:

- The unanticipated circumstances causing need for assistance
- Your specific financial hurdles that are prohibiting your educational goals
- The amount of assistance you are requesting to achieve your educational goals



LINCOLN TRAIL COLLEGE FOUNDATION IS ORGANIZED AND SHALL BE OPERATED EXCLUSIVELY TO ASSIST IN DEVELOPING AND AUGMENTING THE FACILITIES AND CARRYING OUT THE EDUCATIONAL FUNCTIONS OF LINCOLN TRAIL COLLEGE IN ROBINSON ILLINOIS.

IMPROVING LIVES SCHOLARSHIP application

REQUIREMENTS



United Way of Crawford County

MEASURABLY IMPROVING LIVES BY IDENTIFYING HEALTH AND HUMAN SERVICE NEEDS AND UNITING THE RESOURCES OF DONORS, VOLUNTEERS, AGENCIES, AND THE COMMUNITY TO ADDRESS THOSE NEEDS.

ELIGIBILITY:

 Must be a Crawford County resident for a minimum of 2 continuous yea recent relocation to Crawford County for purposes other attending school. Must be a current or prospective LTC student pursuing: (circle one Degree Certificate GED Must have an unanticipated financial need prohibiting student to acheiving academic yools. 	<u>)</u>	ionstra	te 🛛	Personal Le - Your specific f - The unanticip	Form commendation tter to Foundation (inancial hurdles that c ated circumstances cau of assistance you are re	are prohibiting using need for	your educatio assistance	onal goals
Name:	DOB:	1	/	Email:				
Current Address:	Apt#		City		State		Zip	
Telephon e:	Permiss	sion	to text thi	s number:	(circle one)	YES or	NO	
If Yes, please fill out the following: Number of children Monthly cost for childcare <u>Have you received any other scholarships or financial assistance</u> If yes, please list source and amount: <i>CIRCUMSTANCE OF SCHOLARSHIP REQUEST:</i> Unanticipated life event/expense: (please address in let	e while atte	Do y nding	you receive l Lincoln Tr	penefits from P ail College?	roject Child? YES YES or N(5 or NO D		-
Requested amount: If awarded, assista	nce will b	e us	ed for: _					<u> </u>
If used for tuition & fees, account ba	lance afte	er AL	L financi	al aid pays		·		
I certify that all information is correct and that if awarded a scholarship, Lincoln Trail College Also, my signature below gives permission for my high school to provide any academic inform status, hours enrolled, grades, financial assistance, tuition and fees to the director of the Linco Applicant Signture:	oln Trail College	oundat	ion.		or publication for a per oln Trail College to pro	riod of one yea vide informatic	r from the dat on pertaining	te stated below. to my enrollment
I authorize Lincoln Trail College Foundation (LTCF) and Lincoln Trail College (LTC) to contact n from LTCF or LTC. I understand that I am responsible for keeping LTCF/LTC records up to date Applicant Signture:								general information

PLEASE RETURN COMPLETED APPLICATION TO: Lincoln Trail College attn: Financial Aid Dept. 11220 State Highway 1 Robinson, IL 62454