



## HIGH SCHOOL SCHOLARSHIP GUIDELINES

**ELIGIBILITY:** Any high school senior who:

1. Desires to continue their education at Tennessee College of Applied Technology Crossville
2. Has at least a minimum high school average of “B” or equivalent
3. Plans on enrolling full-time by fall trimester 2019, or the first available opening

**DEADLINE:** Application package must be submitted by April 1, 2019.

**AWARD:** Tennessee College of Applied Technology Crossville will award scholarships to seniors graduating from a high school in its service area. Award amount will be determined by the financial aid committee.

**SELECTION PROCESS:** Recipients are selected on the basis of past educational performance, participation in school and community activities, career commitment, prior vocational-technical training, and recommendations from a counselor, advisor, vocational instructor, or employer.

**APPLICATION PACKAGE WILL INCLUDE:**

1. Completed application
2. Three recommendations
3. A current copy of high school transcript

**RETURN TO:** High school guidance counselor or to TCAT Student Services, 910 Miller Avenue, Crossville TN 38555

**TENNESSEE COLLEGE OF APPLIED  
TECHNOLOGY CROSSVILLE (TCAT)  
High School Scholarship Application**

**PERSONAL DATA**

Name \_\_\_\_\_  
(Last) (First) (M. I.)  
Address \_\_\_\_\_  
City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_  
Your previous year Income \_\_\_\_\_ Estimated income for this year \_\_\_\_\_  
Number in Family (include applicant) \_\_\_\_\_ Number in College \_\_\_\_\_

**If you are a dependent please fill out the information below:**

*You are a dependent if you are under the age of 24, not married, no children*

Parents Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_  
Father's Employer \_\_\_\_\_  
Mother's Employer \_\_\_\_\_  
Family income for last year \_\_\_\_\_ Estimated income for this year \_\_\_\_\_  
Number in Family (include applicant) \_\_\_\_\_ Number in College \_\_\_\_\_

**EDUCATIONAL DATA**

Do you have a high school diploma or GED/HISET? \_\_\_\_\_ Year \_\_\_\_\_  
Name of high school \_\_\_\_\_  
Address \_\_\_\_\_  
List career and technical education classes taken in high school. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FUTURE PLANS**

What program do you plan on attending? \_\_\_\_\_  
Why are you interested in attending TCAT?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper has a slight shadow on the right side, suggesting it's resting on a surface. There is no handwriting or other markings on the paper.

Have you submitted the FAFSA (Free Application for Student Aid)? \_\_\_\_\_

Personal Savings \_\_\_\_\_ Social Security \_\_\_\_\_

Veterans Benefits \_\_\_\_\_ Scholarships \_\_\_\_\_

Federal Student Aid (PELL, SEOG, FWS, TN Promise) \_\_\_\_\_

Unemployment Compensation \_\_\_\_\_

Other \_\_\_\_\_

Date\_\_\_\_\_

**TN COLLEGE OF APPLIED TECHNOLOGY CROSSVILLE  
SCHOLARSHIP RECOMMENDATION**

NAME OF APPLICANT \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Your help is needed. I am applying for a scholarship and need recommendations from at least three people. Would you please complete this form and mail it to the Tennessee College of Applied Technology Crossville by April 21, 2017. Thank you for your help.

\_\_\_\_\_ Date \_\_\_\_\_ Applicants Signature \_\_\_\_\_

Willingness to Cooperate	_____
Attendance in work or school	_____
Ability to get along with others	_____
Responsibility	_____
Courtesy and Consideration	_____
Personal Appearance	_____
Dependability	_____
Ability to Learn	_____
Initiative	_____

Rate on a scale of 1 to 5 with one as low and five high.

How long have you known the applicant? \_\_\_\_\_

In what relationship? \_\_\_\_\_

Describe briefly why this applicant should be considered for a scholarship. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name and Title \_\_\_\_\_ Phone \_\_\_\_\_

Employer /Business \_\_\_\_\_

PLEASE DO NOT MAIL TO APPLICANT BUT MAIL DIRECTLY TO:

TCAT CROSSVILLE ~ 910 MILLER AVENUE ~ CROSSVILLE, TN 38555

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Describe briefly why this applicant should be considered for a scholarship. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
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Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name and Title \_\_\_\_\_ Phone \_\_\_\_\_

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