

TUMMA Manufacturing Careers Scholarship

Student Number: _____

Date of Birth: _____

Student Name: _____

High School: _____

High School Grad Year: _____

Email: _____

Phone: _____

Address: _____ City: _____ County: _____

Program: _____

Graduation Date: _____

Campus Location: _____

Have you completed the FAFSA?: _____

How many credits do you plan to take in the following semesters?

Fall 2020: _____

Spring 2021: _____

Summer 2021: _____

Fall 2021: _____

Spring 2022: _____

Summer 2022: _____

How are you planning to pay for school?

(i.e. receiving assistance from employer, loans, other scholarships, etc.)

Why do you feel you are deserving of the scholarship? Explain if you have overcome or are dealing with a difficult challenge.

Describe your short and long term goals. When you complete your program, what do you want to do?

I certify that this application was prepared by me and that the information provided is true, accurate, and complete. I also recognize that any falsified, misleading, or purposely omitted information will disqualify me from consideration and/or may require me to re-pay the scholarship at a later date. In addition, I grant Western Technical College Foundation authorization to consult my academic records/transcripts, financial aid status, to verify scholarship eligibility and grant permission to release my name, address and program to the scholarship donor.

Applicant Signature: _____ **Date:** _____

Return completed application to the Western Technical College Foundation office.

Drop off: Coleman Center, Room 130 **Mail:** 400 Seventh Street North, La Crosse, WI 54601
Or email a copy to [Jaime Fortier at fortierj@westerntc.edu](mailto:Jaime.Fortier@westerntc.edu) **Fax:** 608.789.4771 **Phone:** 608-785-9261