



# John Wood Community College Non-Traditional Waiver Application

Name \_\_\_\_\_  
Last First Middle Prior

Address \_\_\_\_\_  
Street City Zip

Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

High School \_\_\_\_\_ Graduation Date \_\_\_\_\_

Work Experience	Church/Community Groups

Expected Major \_\_\_\_\_ Term/Year you plan to attend \_\_\_\_\_

Please indicate how this scholarship would help you reach your goals at JWCC.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand that if I am selected as a recipient of this award I will still be required to apply for financial aid. **(Please apply as early as possible.)** I also understand that, if I am a resident of Illinois and a qualifier for the Illinois Student Assistance Commission's MAP Grant, those funds will be applied to my tuition first.

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