

**2019 Fall John Wood Community College Foundation  
Pike County—JWCC Concurrent Enrollment Scholarship Application**

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

Last 4 digits Social Security Number \_ \_ \_ \_ Birthdate \_ - \_ - \_ \_ \_ \_ Home Phone \_ \_ - \_ - \_ - \_ - \_ -

Email address \_\_\_\_\_ Cell phone \_ \_ - \_ - \_ - \_ - \_ -

Address \_\_\_\_\_  
Street City State ZIP

High school attending \_\_\_\_\_

Do you plan to attend JWCC after high school?  Yes  No  Maybe

What is your intended area of study? \_\_\_\_\_

Do you plan to pursue a bachelor's degree?  Yes  No

If yes, what are you hoping to do with your college degree? \_\_\_\_\_

Did your mother or father attend college?  Yes  No

Please list all current extra-curricular activities (Note: A separate sheet or resume may be attached):

*I certify that, to the best of my knowledge, all information provided for this scholarship is truthful and correct, and I hereby give permission for this information to be released to the donor of this scholarship.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Submit completed application with your completed High School Dual Enrollment form. If you have questions regarding the JWCC Dual Enrollment Scholarship application, please call the JWCC Advancement Office at 217.641.4104.

# 2020 Spring John Wood Community College Foundation Pike County—JWCC Concurrent Enrollment Scholarship Application

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

Last 4 digits Social Security Number \_\_\_\_ Birthdate \_\_-\_\_-\_\_\_\_ Home Phone \_\_\_\_-\_\_\_\_-\_\_\_\_

Email address \_\_\_\_\_ Cell phone \_\_\_\_-\_\_\_\_-\_\_\_\_

Address \_\_\_\_\_  
Street City State ZIP

High school attending \_\_\_\_\_

Do you plan to attend JWCC after high school?  Yes  No  Maybe

What is your intended area of study? \_\_\_\_\_

Do you plan to pursue a bachelor's degree?  Yes  No

If yes, what are you hoping to do with your college degree? \_\_\_\_\_

Did your mother or father attend college?  Yes  No

Please list all current extra-curricular activities (Note: A separate sheet or resume may be attached):

*I certify that, to the best of my knowledge, all information provided for this scholarship is truthful and correct, and I hereby give permission for this information to be released to the donor of this scholarship.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Submit completed application with your completed High School Dual Enrollment form. If you have questions regarding the JWCC Dual Enrollment Scholarship application, please call the JWCC Advancement Office at 217.641.4104.