

**2021 Fall John Wood Community College Foundation
Adams 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.