

METRO SCHOLARSHIP APPLICATION FORM

Date of Application: (mm/dd/yyyy)					
Current Status:					
College/University sturn Major:					
AATCC Student Char	otor (if applied				
·	лет (п аррпса	oie). _			
Personal Information:					
First Name:Mid	Middle Name:		Last Name:		
Preferred/nickname:			Student ID Number:		
Permanent Address:					
County of Residence:					
College/University Address:					
Home Telephone Number (include area code	e):		Email Addre	ess:	
Preferred Mailing Address (check one):	Permanent		College/Uni	versity	
Are you a (check one): U.S. Citizen		P	ermanent U.S. Re	sident ("Green C	card")
Other (please state):					_
Place of Birth (City, State/Province, Country):					
Educational Information List each educational institution that you have completion and any degree or diploma earned		ce 10ti	h grade, including	the month and	/ear of
School/City, State			s Attended	Degree/Diploma	
	Credit Hours Current Univ.		Total Credit Hrs. Earned (incl AP,transfer, etc.)	Cumulative GPA	Expected Date of Graduation
Record of High School or College/University most significant in each category.)	ity and Comi	munity	y Activities (Pleas	 se limit this entry	to the four (4)

Community, Religious, or Civic Activities:	:		
Academic Awards and Honors:			
Name of Scholarship	Amount Received	Year Received	
Family Information: Parent Name:			
	Company Name:	-	
Home Address:			
Home Telephone Number:			
Parent Name:			
Occupation:	Company Name:		
Home Address:			
Home Telephone Number:			

documentation in order to be considered for scholarships:

- ✓ Resume or Letter of Work Experience (including internships).
- ✓ Personal statement that includes aspirations, financial need and concerns, and intended future career.
- ✓ A copy of your most recent transcript.

PRINT a copy of the final application form, attach the requested documents and MAIL this information to: METRO SCHOLARSHIP COMMITTEE c/o AATCC Foundation, Inc.

PO Box 12215 Research Triangle Park, NC 27709-2215

You may also scan all documents together into a PDF and email to hibbardd@aatcc.org INFORMATION MUST BE RECEIVED BY OR BEFORE MARCH 31 IN ORDER FOR APPLICATION TO BE CONSIDERED.