

Mohawk Valley Community College Foundation Scholarship Application

Please check one of the following categories:

I am a High School Senior, and have included:

1. A letter of recommendation from my High School Principal or Guidance Office
2. Copy of my High School Transcript
3. Completed Application Form (one application form for each scholarship)

I am a current MVCC Student, and have included:

1. A letter of recommendation from an MVCC Faculty Member
2. Most recent College Transcript (request an "unofficial" transcript from Registrar's Office)
3. Completed Application Form (one application form for each scholarship)

Name: _____ Date: _____

Street: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Student ID Number: _____ Date of Birth: _____

Home Phone Number: _____ Cell Phone Number: _____

Anticipated College Graduation Date from MVCC: _____

Have you completed the Free Application for Federal Student Aid (FAFSA) application form? Yes No
(FAFSA must be completed prior to submission of scholarship application)

Program of Study: _____

I am a: Full-Time Student Part-Time Student

Name of Scholarship: _____

Student's Career Goals: _____

Student's Community Service: _____

Please forward this application, letter of recommendation and transcript to:

MVCC Foundation
Payne Hall – Room 220
1101 Sherman Drive
Utica, NY 13501

If you should have any questions, please call (315) 792-5555.

PLEASE READ AND SIGN BELOW

I understand and agree to abide by the conditions of the MVCC Foundation guidelines for any scholarship I may receive. I agree to complete the Free Application Federal Student Aid (FAFSA) application form to apply for the PELL grant and the NYS TAP grant. I agree that the MVCC Foundation reserves the right to provide the donor of my award and MVCC's College and the Office of Marketing and Communication with the information about my application. I understand that any scholarship monies awarded may be credited against my balance of any and all bills to the college. I understand that the scholarship committee will have access to my academic and financial information as part of the review of my eligibility. A condition of any scholarship award is contingent on my writing thank you messages to scholarship donors and attending the annual scholarship awards recognition ceremony unless I am excused in writing by the MVCC Foundation. By signing this document and providing my mobile phone number I agree to opt in to text messages from the MVCC Foundation, Inc.

SIGNATURE: _____ DATE: _____