



NCCWA

NORTH CAROLINA
COMMUNITY WATCH
ASSOCIATION

SCHOLARSHIP APPLICATION

PLEASE PRINT OR TYPE LEGIBLY AND COMPLETE ALL FIELDS

PLEASE RETURN THIS COMPLETED APPLICATION WITH THE FOLLOWING ENCLOSURES (check off all that have been included):

LETTER OF ENDORSEMENT FROM COMMUNITY WATCH
TRANSCRIPT OF GRADES FROM HIGH SCHOOL OR COLLEGE CURRENTLY ATTENDING
TWO LETTERS OF RECOMMENDATION

PLEASE RETURN THE COMPLETED APPLICATION AND REQUESTED ENCLOSURES TO:

NORTH CAROLINA COMMUNITY WATCH
P.O. BOX 13886
GREENSBORO, NC 27415

APPLICATIONS MUST BE POSTMARKED NO LATER THAN JUNE 1ST.

SCHOLARSHIPS WILL BE AWARDED FOR THE SCHOOL YEAR IN THE TOTAL AMOUNT OF \$500.00.

GENERAL INFORMATION

NAME: _____

ADDRESS: _____

CITY: _____ COUNTY _____ ZIP _____

PHONE: DAYTIME () _____
EVENING () _____
CELL () _____

EMAIL: _____ @ _____ . _____

ARE YOU A U.S. CITIZEN? YES NO D.O.B.: _____

SOCIAL SECURITY NUMBER: _____ MARITAL STATUS: _____

OCCUPATION: _____

SPOUSE NAME AND OCCUPATION: _____

QUESTIONNAIRE - SECTION A

Do you have any legal dependants who get more than half (1/2) their support from you? YES NO

Are you a veteran of the U.S. Armed Forces? YES NO

What Community Watch are you a member of? _____

QUESTIONNAIRE - SECTION B

What educational institution are you currently attending or plan to attend?

NAME: _____

ADDRESS: _____

CITY: _____ COUNTY _____ ZIP _____

When do you expect to complete your degree?

What is your current class standing? Freshman Junior Sophomore Senior

What will be your class standing for the beginning academic calendar year?

Freshman Junior Sophomore Senior

Have you received a scholarship from another source? \$ _____ If so, how much? \$ _____

QUESTIONNAIRE - SECTION C

WHAT ARE THE ACTUAL SOURCES OF MONIES / FUNDS AVAILABLE TO YOU (AND YOUR SPOUSE) FOR EDUCATIONAL PURPOSES? (This is PER semester or PER quarter):

WAGES (Full or Part Time) \$ _____
PARENT/SPOUSE \$ _____
SCHOLARSHIPS \$ _____
LOANS \$ _____
OTHER SOURCES (Please identify) \$ _____
DESCRIPTION OF OTHER SOURCE: _____

WHAT ARE YOUR ACTUAL EDUCATIONAL EXPENSES? (This is PER semester or PER quarter):

WAGES (Full or Part Time) \$ _____
PARENT/SPOUSE \$ _____
SCHOLARSHIPS \$ _____
LOANS \$ _____
OTHER SOURCES (Please identify) \$ _____
DESCRIPTION OF OTHER SOURCE: _____

I ATTEST THAT ALL THE INFORMATION ON THIS APPLICATION IS COMPLETE AND ACCURATE.

APPLICANT SIGNATURE

DATE

FOR NCCWA INTERNAL USE ONLY - DO NOT COMPLETE BELOW THIS LINE

DATE APPLICATION RECEIVED: _____

COMMENTS:

