

VOCATIONAL SCHOLARSHIP APPLICATION

| Student's Name: | Student's SFSC ID Number: | | | | |
|--|---------------------------|-----------------|--------------------------------------|---------------------|--------|
| Program: | Term: (Select | One) | Fall | Spring | Summer |
| The Vocational Scholarship is a ne Vocational (PSAV) and Supplemen information, taking into consideration | ital Programs. The F | designed to a | ssist students e Office determine | es eligibility base | |
| | STUDENT | T INTRUCTIO | ONS: | | |
| You must have a current FAFSA on file You must be registered for the term seeking assistance Attach a copy of your Schedule/Bill Indicate all financial aid or other financial resources for which you have applied or plan to apply Free Application for Federal Student Aid (FAFSA) WTS (Job Training). Also referred to as WIA/WAGES Federal and/or State Vocational Rehabilitation Other Public or Private Source(s)—please list: Students' Statement: I am requesting the Vocational Scholarship assistance for the Term indicated above. The information I have provided on this form is true and correct to the best of my knowledge. Students' Signature: Date: | | | | | |
| *****DO NOT WRITE BELOW THIS LINE—FOR OFFICE USE ONLY***** | | | | | |
| BUDGET: | | | | | _ |
| Following are the known financial reso RESOURCES | AMOUNTS | | S of the date beid | | |
| Pell Grant Other Federal/State Aid | | YES NO | | | |
| OTHER RESOURCES WTS Voc Rehab Other: | AMOUNTS (use es | timates if exac | t amount unknow | <u>'n)</u> | |
| UNMET NEED (after aid/resources) Amount requested | \$ | - | Denied | | |

Please submit all documents to: