

## Application for Ben H. Ernst Scholarship

Name:
Address:
City:State:Zip:
Date of Birth: Phone: SS#: XXX-XX
Employment Status: (Circle One) Not Working Full-Time Part-Time
Present Employer: Hours per week:
Are you married? Yes No Number of Dependents:
Are you, at present, the recipient of any other scholarships or the beneficiary of any other type of financial assistance? If so, please specify.
<ul> <li>On a separate sheet of paper write a brief autobiography of approximately 200 words including your future goals and what you are currently doing to obtain these goals.</li> <li>Please send a copy of your high school transcript or college transcript to Ranken.</li> <li>New students please include a recommendation from a teacher or employer, returning student's please have your major instructor complete the attached evaluation form.</li> </ul>
PLEASE READ THE FOLLOWING CAREFULLY
I hereby authorize Ranken Technical College to disclose my financial and/or academic records to the donor/donors of this scholarship. I also authorize Ranken Technical College to disclose details of my scholarship to the public.
Signature Date
Application Deadline: July 1

From:	(Major Instructor)								
RE:	Student					Course/Date			
Please provide the fo	llowing informa	ation c	on the ab	ove s	tudent:				
	EVAI	LUATI	ON OF T	HE AE	BOVE N	AMED	STUD	ENT	
	Excellent 10 9	8	Good 7	6	5	air 4	3	Poor 2	
Interest									
Motivation									
Attitude									
Ability									
Academics (Grades)									
Attendance									
Pride in Performance									
Team Player									
Excluding financial re program of study and	•			tuden	t will sı	ıccess	fully co	ompleto	
If no, please explain:									
Additional Comments	:								
Instruc	tor's Signature	1					Date		

Please return this form to the Financial Aid Office. **Do not return to the student applying for the scholarship.** 

Deadline: July 1