



## 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.

\_\_\_\_\_

- 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.
- Please send a copy of your high school transcript or college transcript to Ranken.
- New students please include a recommendation from a teacher or employer, returning student's please have your major instructor complete the attached evaluation form.

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: June 1

To: Ranken Scholarship Committee -Ben H. Ernst Scholarship

From: \_\_\_\_\_ (Major Instructor)

RE: \_\_\_\_\_  
Student Course/Date

Please provide the following information on the above student:

EVALUATION OF THE ABOVE NAMED STUDENT

	Excellent			Good			Fair			Poor
	10	9	8	7	6	5	4	3	2	
Interest	_____									
Motivation	_____									
Attitude	_____									
Ability	_____									
Academics (Grades)	_____									
Attendance	_____									
Pride in Performance	_____									
Team Player	_____									

Excluding financial reasons, do you feel that this student will successfully complete the program of study and graduate? Yes No

If no, please explain:

Additional Comments:

\_\_\_\_\_  
Instructor's Signature

\_\_\_\_\_  
Date

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

**Deadline: June 1**