

## Application for the Monticello College Foundation Scholarship

Name:					
Address:					
City:		State:	Zip:		
Date of Birth:	Phone:	SS#: XX	X-XX		
Course Enrolled In: _					
Employment Status:	(Circle One) No	t Working Full-T	ime Part-Time		
Present Employer: _		Hours p	er week:		
The completion of a FAFSA form is required prior to making application for this scholarship. The female student must maintain a 3.0 GPA each semester along witperforming 20 hours each semester of community service.					
Are you, at present, other type of financi			ps or the beneficiary o	f any	
On a separate    My Career Fie		te a 300-500 wo	rd essay on "Why I Cho	ose	
<ul> <li>An official copapplicable) is</li> </ul>		ool transcript and	college transcript (if		
PLEASE READ THE F	FOLLOWING CAREF	ULLY			
I hereby authorize R academic records to Technical College to	Monticello College	Foundation. I als	o authorize Ranken		
Signature		i	Date		
Send completed app	lication to the Finar	ncial Aid Office, R	anken Technical Colleg	je,	

Deadline: June 1, 2019

4431 Finney Ave., St. Louis, MO 63113.