

Student ID: _____



Alumni Scholarship Application

The Alumni Scholarship is eligible for previous Ranken graduates and relatives of Ranken graduates (legacy student) to apply. alumnus applicants must be verifiable Ranken graduates as returning students. Legacy student applicant(s) - including but not limited to: children (step or in-law), nieces/nephews, and/or grandchildren - should have a verifiable relationship with the Ranken Alumni.

THIS APPLICATION MUST BE COMPLETED & FILLED IN INK

Name: _____ SS#: **XXX-XX-** _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: () _____ Email: _____

Which Ranken Campus will you be attending for the 2025-2026 academic year?

Campus : ☐ St. Louis ☐ Wentzville ☐ Perryville ☐ Troy ☐ Ashland

Major: _____ Degree: _____ Day or Evening School: _____

Name of Alumnus: _____ Relationship: _____
(If you are the Alumnus, please put your name here) (If you are the Alumnus, put 'Self')

Alumnus' Graduation year: _____

A completed Free Application for Federal Student Aid (FAFSA) is required to determine a student's need for scholarship eligibility.

Have you completed your 2025-2026 FAFSA? ☐ Yes ☐ No

If you have yet to submit a 2025-2026 FAFSA, please do so at www.studentaid.gov

Are you receiving any outside scholarships or are you the recipient of any other type of financial assistance (i.e.,
Veteran's benefits, WIA, Vocational Rehab, Wash U.?)? ☐ Yes ☐ No

If yes, please list what assistance you will be receiving: _____

THE FOLLOWING MATERIALS MUST BE SUBMITTED WITH APPLICATION – FAILURE TO SUBMIT ALL REQUIRED MATERIALS WITH APPLICATION WILL NOT BE CONSIDERED FOR THIS SCHOLARSHIP

Written Requirement: ESSAY (250-word minimum) Topic: How the Ranken alumnus has influenced/motivated you to pursue your education at Ranken Technical College and your respective career field

PLEASE READ THE FOLLOWING CAREFULLY:

I have read and understand the criteria required to receive the Alumni Scholarship. 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 the details of my scholarship to the public.

Student Signature: _____ Date: _____ / _____ / _____

Alumnus Signature: _____ Date: _____ / _____ / _____

Applications can be submitted:

Email: ntrogers@ranken.edu

Fax: 314-286-3366

Mail/Drop Off: Ranken Technical College
ATTN: Financial Aid Office
4431 Finney Ave.
St. Louis, MO 63113



Scan this QR Code to complete this application online!

APPLICATION SUBMISSION DEADLINE: JUNE 1, 2025