

ZUNI ENGAGING TEACHERS AND COMMUNITY

Scholarship Request Form

(For first time and continuing applicants)

| Date of Application: | of Application: Student ID Number: | | | |
|--|---|---|--|--|
| First Name: | Middle Initial Las | t Name | | |
| Mailing Address: | | | | |
| City | State | _ State Zip Code | | |
| Email Address: | Cell Number: | Work Number: | | |
| Program of Study: | | | | |
| Institution | Program | Degree Obtained or # of Credit Hours Earned | Cumulative GPA as of last completed semester | |
| Mode of Study: Full Time Student Part Time Student Are you receiving a Pell Gran Requesting Assistance for: Yes No Summer – Year: Tuition/Books Fall – Year: Transportation (Support for transportation is contingent upon availability of funds) Are you receiving a Pell Gran Are you receiving a Pell Gran Yes No No | | | Yes No | |
| See Scholarship Guidelines your current schedule, your must be attached. | | | | |
| ACKNOWLEDGEMENT: I cert knowledge. I will provide any s my request for this scholarship scholarship guidelines and that | upporting documents needed (tags) assistance. I understand that | ranscripts, etc) which may I must meet all the criteria | assist in determining | |
| Signature | | Date | | |

All information on this document will be kept confidential and only be used for the sole purpose of the ZETAC Scholarship award.