

# Schoolcraft College Transition Center

## Grants and Scholarships Application

*Submit this application and all supportive documentation to:*

**Schoolcraft College Transition Center ♦ 18600 Haggerty Road, Suite MC225 ♦ Livonia, MI 48152 ♦ FAX: 734-462-4552**

**Instructions:**

- Complete both sides of this application (please print).
- Attach copies financial aid award/denial letter and completed registration worksheet.
- **Incomplete applications will not be considered for funding.**

Name \_\_\_\_\_  
Last
First
Initial

Student # \_\_\_\_\_ *To ensure your privacy, please **do not** use a social security number on this form.* Phone (    ) \_\_\_\_\_

Street Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

Email \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_

		Estimated number of credit hours you will take:				Application Deadline*	
		3-5	6-8	9-11	12+	Priority 1	Priority 2
Summer	2010	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Apr 15	June 15
Fall	2010	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	June 15	July 15
Winter	2011	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Oct 15	Nov 15
Spring	2011	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mar 15	Apr 15

\*Applications may be reviewed and awards made on an ongoing basis, based on a first come-first served system.

Have you previously been funded through the TC?     Yes     No    If yes, when? \_\_\_\_\_

Do you have a High School Diploma or GED?     Yes     No

Do you have a college degree?     Yes     No        Associates        Bachelors        Masters

Other certifications or licenses: \_\_\_\_\_

Other colleges attended: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**I am requesting assistance for:**     Tuition     Books     Child Care

**Have you completed the FAFSA?**     Yes     No       Are you receiving financial aid?     Yes     No

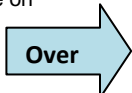
**Marital Status:**     Single (never married)     Married     Separated     Divorced     Widowed

**Number of Dependent Children:** \_\_\_\_\_    **Ages:** \_\_\_\_\_

**Employment:**     Employed Full-time     Employed Part-time     Self Employed     Unemployed

Do any of the following describe you? Please check all that you think may apply.

- Single Parent** – an individual who is unmarried AND has a minor child or children.
- Homemaker** – An individual who, as an adult, has worked primarily without pay to care for the home and family and has diminished marketable skills and must, because of economic necessity, seek full-time work. Or, a homemaker, who because of divorce, separation, death, or disability of spouse, must prepare for paid employment.
- Nontraditional job seeker** – An individual enrolled in an occupational program that is considered nontraditional for his/her gender as determined by national labor Statistics and State Year-End Program enrollment date. The occupations or fields of work include careers in computer science, technology, and other emerging high skill occupations for which individuals from one gender comprise less than 26 percent of the individuals employed in each occupation or field of work.
- Economically Disadvantaged** – Individual from an economically disadvantaged family.
- Limited English Proficiency** – An adult who has limited ability speaking, reading, writing or understanding the English language.
- Individual with a disability** – You must have the signature of the Equal Access Counselor. Documentation of your disability must be on file with the Learning Assistance Center.
- None of the above describes me.



1. My cumulative Schoolcraft College GPA is:
  - between 2.0 and 2.9
  - 3.0 or above
2. My educational goal is:
  - Associate Degree
  - One Year Certificate
  - Skills Certificate
  - Transfer Program
  - Other: \_\_\_\_\_
3. My declared program of study is: \_\_\_\_\_
4. I am:  Female  Male
5. My residence is:  Livonia  Plymouth  Canton  
 Northville  Novi  Other
6. My racial/ethnic heritage is:
  - Amer. Indian or Alaskan Native
  - White  Black or African Amer.  Asian American
  - Hispanic or Latino  Multi-Racial
  - Native Hawaiian or Other Pacific Islander
7. My age is:  18-25  26-35  36-45  46-55  56+
8.  I am willing to attend a service club luncheon and give a short presentation.
9.  I am studying Criminal Justice.
10. I have been out of high school for at least
  - one year  five years  ten years
 and I am returning to college to continue my studies.

11.  I am an individual in transition and I am attending college to prepare for entry/reentry into the workforce.
12.  I am a woman experiencing a life-changing event and improving my life through school.
13.  I am interested in the **College with Confidence** program.
14.  I am a male entering a non-traditional field of study.
15.  I have dependent children enrolled in a licensed daycare while I attend classes at Schoolcraft College

Name of Provider: \_\_\_\_\_

16.  I have completed at least 30 credit hours and I am enrolled in a Liberal Arts program.

17. My career/life goals are:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

18. Tell us about your specific needs or circumstances, and why you should be chosen to receive a scholarship. (Use separate sheet if necessary)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Scholarship Conditions:**

- You must meet the eligibility requirements of the scholarship.
- You must complete the Free Application for Federal Student Aid (FAFSA) and receive an answer from the Schoolcraft College Office of Financial Aid.
- Your declared Schoolcraft College academic program will be used for scholarship determination.
- If you do not attend classes, the scholarship may be forfeited.
- Additional funds may become available after committee determinations have been made, and may be awarded to eligible applicants at a later date.
- You must notify the TC of any changes to your schedule after an award is made. Awards are based on the number of credit hours taken and are automatically removed if changes are made without prior notification to the TC.

**Required Authorizations & Understandings:**

- I affirm that to the best of my knowledge the information on this application is true.
- I authorize the Schoolcraft College TC Committee to review my academic and financial aid files for the purpose of determining scholarship eligibility.
- I authorize Schoolcraft College to release information to the media if a scholarship is granted. *Please note below if you do not want information sent to the media.*
- I understand that applying for a Transition Center Scholarship or Grant does not guarantee I will receive an award.
- I understand that if I accept a Scholarship or Grant I must abide by the policies and procedures governing the award.
- I understand that awards may affect other financial aid awards.
- I understand that if I receive any funds (i.e. Grants, Scholarships, Loans) after receiving a TC award, the amount of the TC award may be reduced and reimbursed to the TC (up to the amount necessary to cover tuition/fees/books.)

I **do not** authorize information released to the media should I receive a scholarship.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

*It is the policy of Schoolcraft College that no person shall, on the basis of race, color, national origin, gender, age, marital status, or handicap, be excluded from participation in, be denied the benefits of, or be subjected to discrimination during any program or activity or in employment.*

OFFICE USE ONLY			
Applied for FA? <input type="checkbox"/> Yes <input type="checkbox"/> No	FA File Complete <input type="checkbox"/> Yes <input type="checkbox"/> No	Eligible for Pell Grant? <input type="checkbox"/> Yes <input type="checkbox"/> No	
EFC _____	GPA _____	SAP _____	<input type="checkbox"/> Other Awards _____
<input type="checkbox"/> Award/Denial Letter	<input type="checkbox"/> Registration worksheet	<input type="checkbox"/> Special Populations Grant	<input type="checkbox"/> Endowment Scholarship