



## Scholarship Application

COMPLETE THIS APPLICATION FORM AND SUBMIT TO:

Office of Student Financial Aid  
Trinidad State Junior College  
Valley Campus  
1011 Main Street; Alamosa, CO 81101

**All applicants**, please complete items 1 through 9.

- High school students have school counselor or principal complete item 10.
- College students, have Office of Student Services, Dean of Students, or Registrar complete item 11.
- Others, please attach a letter with goal and personal information

### Please PRINT or TYPE

1. Name of Scholarship: \_\_\_\_\_

2. Name of Applicant \_\_\_\_\_ 3. SSN \_\_\_\_\_

4. Birthdate \_\_\_\_\_ 5. College Major \_\_\_\_\_

6. Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

7. Phone Number \_\_\_\_\_ 8. E-mail Address \_\_\_\_\_

8. Student Signature \_\_\_\_\_ 9. Date \_\_\_\_\_

**10. (High School Student)** High School Counselor or Principal; Please supply the following information, if available:

Applicant ranks \_\_\_\_\_ in class of \_\_\_\_\_ with a cumulative grade point average to date of \_\_\_\_\_ on a \_\_\_\_\_ scale  
\_\_\_\_\_ ACT composite

Name and Address of High School \_\_\_\_\_  
\_\_\_\_\_

Name of Title of School Official \_\_\_\_\_

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

**11. (College Student)** Applicant's most recent cumulative GPA \_\_\_\_\_

College Official's Signature \_\_\_\_\_ Date \_\_\_\_\_

**12. (Other Applicants)** Letters of recommendation attached?  yes  no

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