

SCHOLARSHIP APPLICATION

Date:_____

P. O. BOX 645 Warrenton, VA. 20188			
1.	Legal Name: (Please Print)		
	Last Name	First Name	Middle Name
2.	Email Address		
3.	Social Security Number		
4.			
PERMANENT RESIDENCE ADDRESS (NOT A P.O BOX)			
5.	Number and Street		Apt. Number
	City	State	Zip Code
	Phone Number ()Work Phone ()		
6.	Gender Male Fen	nale 8. Date of Birth: Month	:Year
7. Major (Program of Study) AssociateBachelors			
8. Enrollment Status (Enter appropriate number in the box)			
8. En onnent status (Enter appropriate number in the box)			
 Attending college for the first time since high school Returning to this college after attending another college 			
3. Never attending this college but have attended or are currently attending another college			
4. Attending high school during the term for which I am applying to this college			
	Last date attendance at Ethnos C	College- Semester	Year
9. Personal and Family Income			
What is your monthly income\$If supported by parents/guardian or spouse wha			
is their income?			
10. Grade Point Average			
What was your grade point average during your most recent school year?N/A			

On a separate sheet of paper please write 2-4 paragraphs why you need this scholarship and how it will benefit you in reaching your educational goals.