

ALLEGANY COLLEGE of MARYLAND FOUNDATION, INC.

SCHOLARSHIP APPLICATION

2008-2009 Academic Year Scholarship and Information/Application

For Office Use Only

- Jr. Cum.
H.S. Cum.
A.C. Cum.
Other Cum.
Exempt

PLEASE READ ALL INFORMATION and REFER TO PAGE 5 BEFORE COMPLETING APPLICATION.

Please photocopy the application making as many copies as necessary. You are required to submit one application for each scholarship for which you are applying. Only one envelope is necessary to mail all applications.

Scholarship Name: Scholarship Deadline*:

*Refer to application deadline date listed at the top of the page which lists scholarship description.

Applicant's Name: Last First MI Male Female

Social Security Number: Date of Birth:

U.S. Citizen/Permanent Resident: YES NO

Local Address:

City: County: State: Zip:

Telephone Number: Home Work

Permanent Address (if different from above):

City: County: State: Zip:

High School attended: Date of Graduation: (month/year)

In what curriculum are you enrolled or planning to enroll? Full-Time Part-Time

Expected date of graduation from Allegany College of Maryland: month year

Applicant's place of employment:

Parent's Spouse's Place of employment:

Are you applying for Federal Student Aid (FAFSA)? Yes No

If no, please state reason :

I hereby give my consent to the Allegany College of Maryland Foundation, Inc. to obtain information on me which is pertinent to my scholarship application and to share this information with the members of the scholarship selection committee, scholarship donors, and scholarship donor organizations.

Signature of Applicant X Date

It is the student's responsibility to notify the Foundation Office if your eligibility to receive the scholarship changes.

Latest high school or college transcript must be attached unless already submitted to the Admissions Office. It is the responsibility of the student to make sure the College has received your transcript.

