POWER Pathways Scholarship Application

Guilford Technical Community College with support from of Bank of America and private donations will award scholarships to students who show financial hardship and have been accepted into the program to cover the cost of the program registration fees.

Eligibility Requirements:
To be considered by the scholarship committee, an applicant must meet the following requirements:

1) Be accepted or have submitted an application to the current POWER Pathways program.
2) Have a career goal of working in the Food Service Industry.
3) Demonstrate financial hardship.

Applicants will be evaluated on the attached criteria listed. Only completed and signed applications will be reviewed by the selection committee. Notice of the awards will be communicated by mail or email whether approved or denied. Renewals are not automatic and candidates are encouraged to reapply for scholarship funds needed for future programs. Guilford Technical Community College reserves the right to cancel any scholarship at any time the applicant falsifies the application or other scholarship requirements.

The scholarship application deadline for the Spring 2020 semester is January 3, 2020. All documents must be submitted on or before the final deadline via mail, email, or fax. For questions regarding the scholarship application, or to submit your application, please contact our Adult Basic Education Program Coordinator in High Point, Carolyn Bynum, email address chbynum@gtcc.edu, fax (336) 889-4564 or our Adult Basic Education Program Coordinator in Greensboro, Krystal Gossett; email address kbgossett@gtcc.edu, fax (336) 358-2181.

The college’s mailing address is Guilford Technical Community College, PO Box 309, Jamestown, NC 27282.
**Applicants must complete the entire Application in order to be considered for the Scholarship**.

Date: ______________
Name: ____________________________________________
Address: ____________________________________________
City/State/Zip Code: __________________________________
Phone Number: ____________________ Email: ____________

Number of people in household: _________

Please indicate your Educational Level:

☐ Some high school credits
☐ High School Diploma/GED
☐ Other ____________________________

Have you ever taken classes at any GTCC campus? (circle one) Yes or No

<table>
<thead>
<tr>
<th>Are you receiving any of the following: (check all that apply)</th>
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<tbody>
<tr>
<td>☐ Unemployment benefits Amount/month: ________________________</td>
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<tr>
<td>☐ Department of Social Services assistance: EBT, Work First, Medicaid/Medicare, Housing, etc. Amount/month: ________________________</td>
</tr>
<tr>
<td>☐ Social Security Disability Benefits Amount/month: ____________</td>
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<tr>
<td>☐ Child Support Amount/month: _______________________________</td>
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<tr>
<td>☐ Employer severance package Amount/month: ____________________</td>
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<tr>
<td>☐ Workforce Investment Act (WIA) funding through Job Link (Y/N) __________</td>
</tr>
<tr>
<td>☐ Other ________________________________________________</td>
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<tr>
<td>☐ Total Household Income: If you live with a husband, wife, relative, parents, or friend, please include their income. Also include income from a part-time job(s), rental property income, retirement income, alimony, etc. Amount/month: ________________________</td>
</tr>
</tbody>
</table>
Scholarship Questions

Are you working right now? Have you ever worked in the past? Where have you worked before?

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Why are you interested in the Food Service Pathway Program?

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____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

What do you hope to learn or gain from taking this program?

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

ALL INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE ___________________________ DATE ______________

Applicants will be notified of a decision by mail or email.

APPROVED: □ Yes □ NO

SCHOLARSHIP AWARD AMT: _______________________

PREFERRED CLASS LOCATION
□ Greensboro
□ High Point