



SCHOLARSHIP APPLICATION

FOR FOUNDATION OFFICE USE ONLY	
FUND NAME _____	FUND NAME _____
DETAIL CODE _____	DETAIL CODE _____
AMOUNT \$ _____	AMOUNT \$ _____

The Foundation provides and funds a large number of scholarships to students attending Barton Community College for educational opportunities and/or training. Thanks to the generosity of many donors, we have scholarships with a wide variety of criteria to assist with your financial obligations of attending college. Please complete and return this form to the Foundation office (located in the Administration Building); mail it to 245 NE 30 Rd, Great Bend, KS 67530; or fax it to (620) 786-1138.

Submitting a scholarship application does not guarantee a scholarship award.
There is no deadline date but applications received by June 1st will be given first preference.

Please list academic year for which you plan to attend: (Scholarships are awarded one academic year at a time. You must reapply each year.) Year 20 ____/____

Legal Name: _____
 Last First MI Previous or Maiden Name

Address: _____ City: _____ State: _____ Zip: _____

Contact Phone Number: _____ Email: _____

Date of Birth: _____ Sex: Male Female Barton Identification Number or Social Security Number: _____

Race: (Race and Citizenship information used for matching scholarship criteria purposes only.)

- American Indian or Alaskan Native Asian Black or African American Hispanic or Latino
 Native Hawaiian or Pacific Islander White Race Unknown Non-Resident Alien

Kansas Resident? Yes No County of Residence: _____ U. S. Citizen? Yes No

Name of High School you attended: _____ Diploma GED Year Received: _____

Current GPA (if available): _____ ACT Score (if available): _____ Program of Study: _____

Are you a member of a Barton athletic team? Yes No If Yes, What sport? _____

Are you receiving a Barton athletic scholarship? Yes No

Number of college hours completed: _____ Will you be a full time (12 hours or more) or part time student?

How many currently reside in your household? _____ Are you the head of the household? Yes No

Your (applicant) gross annual income: _____ Gross annual parent(s)/spouse income: _____

Marital Status: Single Married Are you a single parent? Yes No

Are you receiving any Federal financial aid? Yes No Are you a dependent of a Barton employee? Yes No

Are you a dependent of a Barton alumni? Yes No If Yes, Name of alumni: _____

(continued on back page)

Please give a short description of why you are applying for scholarship assistance. If applicable, include information on any high school extra-curricular activities and/or leadership roles you held, as well as future education and career goals.

I am applying for a scholarship because: _____

(If you need additional space, you may attach another piece of paper.)

If I am awarded a Foundation scholarship, I understand the Foundation office may publish information regarding my award. The Foundation office may also provide my contact information to the donor of my scholarship if it is requested. We must receive written notification from you if you do not want this information shared.

Name of Hometown Newspaper: _____

By my signature below I certify that the information given is correct and complete.

Student Signature: _____ Date: _____

Non-discrimination Notice: Barton Community College is an equal opportunity provider and employer. Visit equal.bartonccc.edu for more information.