



925 West Edenborne Parkway • P. O. Box 2367 • Gonzales • LA • 70707
(225) 743-8500 • www.rpcc.edu

SCHOLARSHIP APPLICATION 2017-2018 ACADEMIC YEAR

- Students **MUST** meet the minimum GPA requirement 2.5
- Students **MUST** apply for the 2017-2018 Federal Student Aid Application (FAFSA) <https://fafsa.ed.gov/>
- Students **MUST** submit two letters of recommendation (at least one from a recent teacher or employer)
- Students **MUST** be enrolled at least half-time (6 credit hours)
- Freshman students **MUST** submit copy of high school transcript.

Date of Application: _____ Semester (choose one): Fall Spring

Full Name: _____ LOLA #: _____

Address: _____
Street City State Zip

Telephone: _____ E-mail address: _____ Date of Birth: _____

H. S. Graduation Date or GED Date: _____ High School: _____

Program of Study at RPCC: _____ Expected Graduation Date: _____

List any academic achievements:

List any extracurricular activities, club memberships, and leadership positions including high school, college, volunteer, and community:

Please list any extenuating circumstances that might affect you and/or your family's ability to help pay for school:

RPCC enrollment status: First Time student Currently Enrolled at RPCC Transfer Student

As a First Time student (high school graduating seniors), I have attached a copy of my High School transcript.

Deadlines: Fall applicants **June 15** OR Spring applicants: **November 15**

I hereby certify that the information submitted in this application is true, correct, and complete to the best of my knowledge. I authorize River Parishes Community College to release information contained in this application (including academic records and personal biographical information) to the awarding scholarship committee and agencies/donors providing for this scholarship. In addition, I authorize River Parishes Community College to access my electronic academic record. I understand the names of scholarship award recipients may be published in area newspapers, and recipients may be asked to provide a photograph. The number of scholarship applications received could greatly exceed the amount of available funding. I understand that filling out this form does not guarantee that I will receive a scholarship. In addition, any debts owed to River Parishes Community College must be paid prior to the disbursement of scholarship funds.

Signature: _____ Date: _____

<i>FOR OFFICE USE ONLY</i>			
ACT Score: _____		High School GPA: _____	
College Hrs. Attempted: _____		College Hrs. Earned: _____ Overall RPCC GPA: _____	
FAFSA Completed? _____		Letters of Recommendation? _____	
Enrollment Status: _____		Other Financial Assistance? _____	
Type: _____	Amount: _____	Type: _____	Amount: _____
Type: _____	Amount: _____	Type: _____	Amount: _____