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**TUMMA Manufacturing Careers Scholarship**

Student Number: Date of Birth:

Student Name:

High School: High School Grad Year:

Email: Phone:

Address: City: County:

Program: Graduation Date:

Campus Location: Have you completed the FAFSA?:

How many credits do you plan to take in the following semesters?

Summer 24 Fall 24 Spring 25 Summer 25

How are you planning to pay for school?

(i.e. receiving assistance from employer, loans, other scholarships, etc.)

Please complete page 2.

Why do you feel you are deserving of the scholarship? Explain if you have overcome or are dealing with a difficult challenge.

Describe your short and long term goals. When you complete your program, what do you want to do?

*I certify that this application was prepared by me and that the information provided is true, accurate, and complete. I also recognize that any falsified, misleading, or purposely omitted information will disqualify me from consideration and/or may require me to re-pay the scholarship at a later date. In addition, I grant Western Technical College Foundation authorization to consultant my academic records/transcripts, financial aid status, to verify scholarship eligibility and grant permission to release my name, address and program to the scholarship donor.*

Applicant Signature: Date:

**Return completed application to the Western Technical College Foundation office.**

**Drop off:** Coleman Center, Room 130 **Mail:** 400 Seventh Street North, La Crosse, WI 54601

**Or email a copy to** Jaime Fortier at fortierj@westerntc.edu **Phone**: 608-785-9261