

**Western Technical College Foundation
Scholarship Application**

Application Due: April 1st

Must enroll in six or more Western credits. Selected student will be awarded \$500 to individual's Western student account during the fall semester.

Student Name:

Date of Birth:

High School:

Home Address:

Email:

Phone:

Intended Program:

Start Date:

Western Student I.D. Number (if known):

How are you planning to pay for school?

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

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 consult 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

Mail: Western Foundation | 400 Seventh Street North | La Crosse, WI 54601

Or email a copy to [Jaime Fortier at fortierj@westerntc.edu](mailto:Jaime.Fortier@westerntc.edu)

Fax: 608.789.4771