

2025 Foundation Scholarship Application

(919) 775-5401 or Toll free 1-800-682-8353

www.cccc.edu



To be considered for a scholarship, you MUST submit the following information with this application:
 a) CCCC admissions application, b) Letter of recommendation from high school, college instructor or non-family member (on back) and c) attach a brief essay explaining your career goals, community involvement and any additional information concerning your financial need. **Only completed applications will be considered.**
 Please read all instructions and requirements and print or type application.

CCCC Student ID _____ Name _____ Last _____ First _____ Middle/Maiden _____

Date of Birth _____ / _____ / _____ Age _____ Phone Numbers (_____) _____ Home _____ Cell _____
 mm dd year

Address _____ Mailing Address _____ City _____ State _____ Zip Code _____ County of Residence _____

E-mail address _____ Issuing Agency or _____ High School Last Attended _____

Educational Status (check one)
 Graduated from High School
 Received GED/AHS Diploma
 Current High School Student
 Did Not Graduate from High School
 Post High School Vocational Diploma
 Associates Degree
 Bachelor's Degree or Higher
 Master's Degree or Higher

Employment Status Full-time Unemployed Part-time Retired Employer: _____ Position: _____

Have you lived **outside** North Carolina in the last 12 months? Yes _____ No _____ Are you a U.S. Citizen? Yes _____ No _____

Marital Status: Single Married Separated Divorced
 Live with: Parents Spouse Children Alone
 Are you receiving funds from other sources? Scholarships WIA VA Grants

Number of persons in household: _____ Relationship _____
 Program of Study: _____ Current Grade Point Average (GPA): _____

This section is not required; however, to qualify for certain scholarships the following information must be completed:

Ethnicity White Black Indian Hispanic Asian/Pacific Islander Other _____ **Gender** Male Female
 Other Central Electric Membership or South River Electric Membership Corporation Member Acc#: _____
 State Employees Credit Union Member

REQUIREMENTS: Attend Scholarship Event, write thank you note to donor, complete the Free Application for Federal Student Aid (FAFSA) and must be a full-time student.

Attach a brief essay explaining your career goals, community involvement and additional information concerning your financial need.

I hereby certify that I have read and I understand the requirements of being a scholarship recipient and that all information I have set forth herein is true to the best of my knowledge.

Signature _____ Date _____ Return to: foundationscholarship@ccc.edu or mail to Central Carolina Community College • 1105 Kelly Drive • Sanford, NC 27330

Scholarship Application Letter of Recommendation

Scholarship Applicant's Name (Print) _____

Last

First

Middle

For Applicant Use Only:

I, _____ (Signature of applicant) _____ hereby waive my right of access to this reference report. Date: _____

For Respondent Use Only:

(Please return to the appropriate address shown below.)

Please indicate the length of time you have known this applicant and the nature of the relationship you have had with him/her: _____

Do you recommend this applicant as a recipient of a scholarship? _____ Yes _____ No

Please explain the reasons for your recommendation: _____

Signature: _____

Email address/Phone: _____

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Central Carolina Community College
1105 Kelly Drive
Sanford, NC 27330