Cleveland State Community College Foundation
Application for Dual Enrollment Scholarship

Soc. Sec. No. or Student I.D. No._____

Name_____
Last First Middle

Mailing Address_____
Street/P.O. Box City County State Zip

Home Telephone _____ Cell Telephone _____ Date of Birth_____

E-mail_____ Course _____

Current High School_____ Cost of Book _____

Requirements for dual enrollment scholarship, which are need-based:

1. Completed scholarship application, with first page of parent's most current tax return (will be shredded after award determination)
2. The scholarship pays for the balance of one class after Hope scholarship is applied. The award also provides a book voucher in the CSCC campus bookstore -- unless the high school provides books. **There are no cash refunds given**.
3. If the student withdraws from the class, the entire award must be repaid to the Foundation.
4. An acceptance form must be signed by parent or guardian and returned to the Foundation Office.
5. There is a maximum of one scholarship for one dual class per semester.
6. Student must have a 2.75 GPA, in the dual class to be considered for a future scholarship.
7. Only complete applications, submitted by the deadline of January 12 will be considered.

Financial Requirements

# of Household Members	Maximum Annual Income
2	$ 27,000
3	$ 34,000
4	$ 41,000
5	$ 48,000
for each additional person add	$ 7,000

I certify I have read, understand and agree to adhere to the eligibility requirements for receipt of a Cleveland State Community College Foundation Scholarship and that all information is correct.

_____ _____
Student Signature Date

_____ _____
Parent/Legal Guardian Signature Date

Office Use Only

Date received_____ Income_____ Scholarship_____

Dependents_____ Ineligible_____ Book Voucher_____

Total Award_____

Project #9158/Dual/7/21/09