

CPCC Foundation Thomas J. Hall Endowed Scholarship Application for Corporate and Continuing Education, CCE

INSTRUCTIONS:

1. To be considered, turn in a completed application with all applicable signatures to the Small Business Center.
2. Applications **must** include a written statement addressing one of the following questions:
 - a. What drives you to be an entrepreneur, and does your existing or planned business impact the community?
 - b. What special attribute or accomplishment sets you apart from others and how will it help lead you to succeed as an entrepreneur?
3. Check for additional scholarship criteria and other relevant information pertaining to this offering at: www.cpcc.edu/sbc/comprehensive-courses/scholarships

PERSONAL INFORMATION: (PLEASE PRINT)

Full Name: _____
(First) (Middle) (Last)

Address: _____
(Street) (Apt. #) (City) (State) (zip code)

Home Phone: () _____ Alternate Phone: () _____

Email Address: _____ Social Security #: _____
(Optional) - For identification purposes only

Have you taken classes at CPCC? Yes No If yes, CPCC Student ID #: _____

What is the highest level of education completed? High School/GED Associates Bachelors Masters

Are you currently enrolled in a degree program? Yes No

If so, what is your major and at what institution are you currently enrolled: _____

Are you enrolled: Full-time (12 or more credits) Part-time (less than 12 credits)

Do you have any sponsors paying tuition and books? Yes No

If so please name: _____

AUTHORIZATION INFORMATION: (INITIAL BELOW)

_____ I release to Central Piedmont Community College (CPCC) and the CPCC Foundation the right to access all my current and ongoing personal and education records at CPCC. If awarded a scholarship, I understand that I must meet the scholarship criteria and Standards of Academic Progress for CPCC and the CPCC Foundation.

_____ I understand my name and information from my academic history may be released to the scholarship selection committee and the scholarship donor(s). If awarded a scholarship, I release to CPCC and the CPCC Foundation, the right to arrange a meeting with the donor(s) and use my name, story, and picture for printed and video materials, reports, and press releases, without compensation, as well as I will attend ceremonies and receptions. I also recognize the advisability of communicating a letter of thanks to the donor of the scholarship.

I certify that the statements herein are true to the best of my knowledge and grant my permission for the information contained herein to be shared with the scholarship selection committee and scholarship donor(s).

Student Signature: _____ **Date:** _____

RETURN YOUR COMPLETED APPLICATION TO:

CPCC Small Business Center/Hall Scholarship
 P.O. Box 35009, Charlotte, NC 28235-5009
 Fax - 704.330.6852

Recommended by: _____ Date: _____ Financial Aid Office Signature: _____ Date: _____
 Scholarship Fund Recommended: _____ Date: _____ Amount: _____
 Foundation Executive Director Signature: _____
 Scholarship Awarded: _____ Date: _____