

101 Community College Way Johnstown, PA 15904 814.262.6499 foundation@pennhighlands.edu

SCHOLARSHIP APPLICATION

IGNITE THE FIRE CULINARY SCHOLARSHIP

Full name:							Date:			
_	Last		Fir	st	1	M.I.				
Address:							Phone:			
	Street a	treet address			/Unit #					
<u>-</u>							Email:			
	City			State	Zip	Code				
Student ID #	_		Major				High Sc G.P.A.	hool		
High School:								_		
Served or is cu	urrently servir	ng				From:			To:	
in the military									_	
Registered Full time or Fu Part time		Full Time	ull Time Part Time			FAFSA Completed:		YES	NO	
Agreements: Please check all boxes		If awarded a scholarship, I agree to write and send a thank you not to the donor.								to the
		If awarded a scholarship, I agree to maintain the GPA receive the second semester award.							ement t	0
		If awarded a scholarship, I agree to comply with any additional requirements to keep eligibility.								

Complete the essay prompt: Explain how receiving an education at Pennsylvania Highlands Community College will impact your life (500 Word Maximum).

Please email the application and essay to foundation@pennhighlands.edu or mail to Pennsylvania Highlands Community College Attn: Foundation 101 Community College Way Johnstown, PA 15904

