



**Mount Wachusett
Community College**

444 Green Street, Gardner, MA 01440-1000

Active Duty Military Scholarship Application (Part 1, to be awarded the equivalent of DOD Tuition Assistance)

To apply for the equivalent of DOD Tuition Assistance, just fill out part 1. To apply for additional assistance, fill out part 2.)

IMPORTANT: TYPE OR PRINT CLEARLY

Today's Date: _____

Student Name (Last, First Middle): _____

Service Member's Name (Last, First Middle): _____

MWCC ID Number or Social Security Number: _____ Age: _____

Permanent Home Address: _____

Email Address: _____

Home Phone Number:(_____)_____ Work or Cell Phone Number:(_____)_____

Gender: Male or Female Ethnic Background: _____ US Citizen (circle one): Yes No

State of Residence: _____ County: _____ Estimated Graduation Month/Year: _____

Semester/Year you first enrolled or will enroll at MWCC: _____

Academic Major/Minor: _____

Which branch of the US Armed Forces is servicemember currently serving in? _____

Rank: _____ Years of Service: _____

Current Unit: _____

Address: _____

I certify that the information reported on this application is accurate and correct to the best of my knowledge.

Servicemember Signature: _____ Date: _____

Print Servicemember Name _____

Student Signature: _____ Date: _____

Print Student Name _____

Active Duty Military Scholarship Application

(Part 2, optional - to apply for merit/need based scholarship funds)

Student Name: _____

Describe any community service program or volunteer work in which you have participated, including a specific number of hours if you know them:

Briefly describe your career/professional goals:

List and/or explain any Honors or Special Recognition Received:

Write (type) and attach to this application a short essay describing your civilian career aspirations and how MWCC fits into your plan.

Provide two letters of recommendation (preferably one should be from your commanding officer):

List the names and titles of the two recommendations: _____

I certify that the information reported on this application is accurate and correct to the best of my knowledge. I hereby give the MWCC Financial Aid and Records Offices permission to release information concerning my academic history and financial need and eligibility to the MWCC Scholarship Committee for the purpose of evaluating my eligibility for a scholarship.

Student Signature: _____ Date: _____

Print Student Name _____

Submit this application, your essay and two letters of recommendation to the Financial Aid Office.

NOTE: Mount Wachusett Community College commits to providing active duty service members the equivalent of DOD Tuition Assistance Program. Completing this application does not guarantee you a scholarship beyond the equivalent of the TA program. Additional scholarships are awarded based on different criteria specified by a donor or sponsoring agency. You will be notified if you become eligible for a scholarship.

OFFICE USE ONLY

Updated: 4/10/2006