



**2016-2017 CCE SCHOLARSHIP APPLICATION**

**Check One:**

- First-time Applicant**
- Renewal Applicant**

**PERSONAL DATA:** *(Please Print)*

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE #: (\_\_\_\_\_) \_\_\_\_\_ CELL/WORK #: (\_\_\_\_\_) \_\_\_\_\_

EMAIL: \_\_\_\_\_

Student ID #: \_\_\_\_\_

- Citizen Status:
- U.S Citizen
  - Eligible Non-Citizen  
*(\*Must provide copy of Alien Registration Card: I-151 or I-551)*

**EDUCATION:**  
*(You must be presently enrolled in a CCE program to be eligible for the CCE Scholarship)*

Current CCE Program(s): \_\_\_\_\_

Anticipated Graduation Date: \_\_\_\_\_

List other scholarship, external aid, tuition reimbursement, or financial aid (including alumni discount or corporate discount programs) that you are or will be receiving this academic year:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATION:**

I affirm that I will use any funds I received under this program solely for expenses related to attendance at Assumption College. I further state that I am not in default of a NDSL, GSL, or PLUS loan for attendance at any institution, nor do I owe a refund for any previous financial aid received.

**I declare under penalty of perjury that the foregoing is true and correct:**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return this form, along with pages 1 and 2 of your most recent Federal tax return (1040), and a 500- word personal statement *no later than August 12, 2016* to:

**Continuing & Career Education  
Assumption College  
500 Salisbury Street  
Worcester, Massachusetts, 01609**