

## **SCHOLARSHIP APPLICATION**

To apply for a scholarship, submit completed application to the Friends of MCC Foundation (A219).

## **PERSONAL INFORMATION**

First name*
Middle name
Last name*
Student ID
Intended Program of Study
Intended Start Date
Address 1*

Address 2

City\*

State\*

Zip\*

Home phone

Email address

Date of Birth (MM/DD/YYYY)

Gender Male Female



8900 U.S. Highway 14 | Crystal Lake, Illinois 60012-2761 | (815) 455-8721 | www.mchenry.edu/supportmcc

Please write an essay describing each of your education, career, and personal goals and include how MCC is important in obtaining your goals.

Tell us how you are paying for college, why you need financial support through a scholarship, and what financial constraints you are experiencing as you pursue your education.

APPLICANT'S SIGNATURE

DATE

Please complete, sign and date the MCC Scholarship Application form and submit to the Friends of MCC Foundation Office (A-219).

If you have any questions, please call the Friends of MCC Foundation Office at (815) 455-8721.



Additional essay space if needed