



Central Piedmont Community College
Scholarship Application
(please print)

1. Student's Name: _____
(First) (Middle) (Last)
2. CPCC Student ID /Social Security # (optional): _____
3. Address: _____
Street (Apt. #) City State Zip
4. Telephone #: _____ Alternate #: _____
5. Email: _____
6. What is your dependency status? Dependent Independent
7. Family information: Number of people in your household: _____
Annual family adjusted gross income reported on last year's Federal tax return:
\$ _____ (Include applicant's earnings)
8. Did you complete the free application for federal student aid (FAFSA)? Yes No
9. Are you presently receiving a CPCC scholarship(s)? Yes No
If so, please name: _____
10. Do you have other sponsors paying tuition and books(s)? Yes No
If so, please name: _____
11. If you are a current CPCC student, how many credits have you completed? _____
12. What is your program of study/major? _____
13. Indicate your enrollment plans at CPCC? Full-time Part-time / Day Evening
14. Have you graduated from high school?
Yes If so, when? (Month/year) _____
No If not, when will you graduate from high school? (Month/year) _____
15. What is the name of your high school? _____
City and state of your high school: _____
16. Have you requested that your official high school transcripts be sent to CPCC?
Yes No
17. If you are a high school senior, what is your cumulative GPA? _____
Please have your Career Development Counselor (Guidance Counselor or Principal)
verify your GPA by signing here: _____

18. If applying for a specific scholarship please name it here (Examples: [College Experience](#) [College Transfer](#), [College Tech Prep](#); [Technical Programs](#); [President's Scholarship](#); [Academy of Finance](#); [Levine](#); [Foundation](#); or other): _____

19. Write a brief statement on your future goals and how a scholarship will help you achieve them: _____

20. Describe your extra-curricular activities, community service, and honors:

By signing this application,
I certify that the information provided above is accurate to the best of my knowledge.

Your Signature: _____ **Date:** _____

Return your completed application to:
CPCC Financial Aid/Veteran Affairs Office
P.O. Box 35009, Charlotte, NC 28235-5009

Phone: 704-330-6942
Fax: 704-330-5053

In compliance with federal law, the provisions of Title IX of the Education Amendments of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1973, Central Piedmont Community College does not discriminate on the basis of age, color, ethnic or national origin, handicap, military service, race, religion, or sex in its administration of education policies, programs, or activities; its admission policies; scholarship and loan programs; or employment. Inquiries or complaints should be directed to the Director of Equal Opportunity; Room 202, College Administration 4.

For Financial Aid Office and Scholarship Committee Use Only	
Name of Scholarship Awarded: _____	Date Awarded: _____
EFC# _____ Unmet Need: _____	Current Aid/Amount: Pell \$ _____
SEOG \$ _____ NCCCG \$ _____	Other: \$ _____
Previous semester credit hours: _____	Current semester credit hours: _____ Program GPA: _____
Amount Awarded: Fall \$ _____	Spring \$ _____
Scholarship Processed by: _____	
Comments: _____	