



# MCC Scholarship Application

For Office Use Only		
ID _____	GPA _____	EFC _____
Hours Enrolled _____	Credits completed _____	
Awards _____		

**In order to be considered for a scholarship you must:**

- Complete both pages of this Scholarship Application (please print clearly or type).
- Have an application, transcript, & test scores on file in the Admission's Office.
  - It is to your advantage to have a current *Free Application for Federal Student Aid* (FAFSA) or FAFSA 4Caster on file with the MCC Financial Aid Office.
  - Return the completed Scholarship Application to: Marshalltown Community College Scholarships Foundation Office  
3700 South Center Street, Marshalltown, IA 50158

Name \_\_\_\_\_ Social Security Number: x x x - x x - \_\_\_\_\_  
Last First Middle Initial

Address \_\_\_\_\_  
Street City State Zip Code

Phone Number \_\_\_\_ - \_\_\_\_ - \_\_\_\_ E-mail \_\_\_\_\_

High School Diploma/GED from \_\_\_\_\_ State \_\_\_\_\_ Graduation Year \_\_\_\_\_

US Citizen  US Resident  Neither  Country of birth \_\_\_\_\_ Eligible for Federal Pell Grant Y/N

Female  Male  Are other members of your family in college? If yes, who? \_\_\_\_\_

Term beginning: Year \_\_\_\_\_  August (Fall)  January (Spring)  May-July (Summer)

Indicate if your major is listed below: (check only one )

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Accounting                        | <input type="checkbox"/> Construction Technology         | <input type="checkbox"/> Mortuary Science   |
| <input type="checkbox"/> Agriculture                       | <input type="checkbox"/> Criminal Justice                | <input type="checkbox"/> Nursing (PN)       |
| <input type="checkbox"/> Art or Drama (circle one)         | <input type="checkbox"/> Dental Assisting                | <input type="checkbox"/> Nursing (ADN)      |
| <input type="checkbox"/> Business Administration           | <input type="checkbox"/> History                         | <input type="checkbox"/> Science            |
| <input type="checkbox"/> Early Childhood Education         | <input type="checkbox"/> Machine Tool Tech/Tool & Die    | <input type="checkbox"/> Teacher Education  |
| <input type="checkbox"/> Computer Applications in Business | <input type="checkbox"/> Mass Media/Broadcast Technology | <input type="checkbox"/> Utility Technician |
| <input type="checkbox"/> Computer Related Programs         | <input type="checkbox"/> Medical Assistant               | <input type="checkbox"/> Welding            |

If your major is not listed above, what is your major or eventual planned degree? \_\_\_\_\_

Do you plan to complete a 4-year degree? Yes/No If yes, where? \_\_\_\_\_

Review the following list and check every item that applies to you:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Child of MCC Alum                                 | <input type="checkbox"/> Minority Student                                      | <input type="checkbox"/> Parents/grandparents are or were members of the Armed forces |
| <input type="checkbox"/> Farm background                                   | <input type="checkbox"/> Returning adult student                               | Relationship/Name: _____  |
| <input type="checkbox"/> Hispanic/Latino-with English as a second language | <input type="checkbox"/> Parent is a member of United Auto Workers, Local #893 | _____   |
| <input type="checkbox"/> First-generation college student                  | <input type="checkbox"/> Student with a disability                             | <input type="checkbox"/> Child of Marshalltown Firefighter                            |
| <input type="checkbox"/> Military or Veteran                               | <input type="checkbox"/> GLBTQ or GLBT Friend/Ally                             | Name _____ Yrs _____  |

Indicate your reasons for applying for a scholarship: (course of study, future plans, financial circumstances, etc.)

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List your extracurricular activities, scholastic honors, community involvement, etc.

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**ADDITIONAL SCHOLARSHIPS** – Please attach or include additional information to be considered for these scholarships:

- Silver Spectrum Art/Theatre Scholarship:** include 800-word essay about your philosophy as an artist.
- Nursing Scholarships:** include 1-2 paragraphs about the professional values a nurse should have.
- UAW Scholarship:** include 300 word essay about history of UAW, 50 words about personal goals. List UAW parent.
- Medina Family:** include 2 page essay about the American Dream and what it means to you.
- GLBTQ Scholarships:** include 300-word essay about who you are, why you’re applying, and either GLBTQ+ obstacles you are overcoming/have overcome, or your activism to support the GLBTQ+ community.
- Kevin Hunt Memorial:** include 100 words or less about activities involved in, goals for future, and if active in YMCA/YWCA, include a letter of support from a Y director.

**Make sure to complete all sections of this application.**

**Incomplete applications diminish your chances of being selected for a scholarship.**

*All scholarships associated with this application are provided by Marshalltown Community College, Marshalltown Community College Foundation, and Iowa Valley Community College District.*

**I understand that if I am awarded a scholarship:**

- It is contingent upon meeting the selection criteria for the semester(s) in which the award will be credited.
- It is NOT automatically renewed for my second year of school.
- I will immediately notify the Financial Aid Office of any changes that affect my enrollment status of my course of study (major).

*I certify that the information on this application is correct and complete, and I consent to the release of personally identifiable information from my education records protected under FERPA. I understand that the records to be disclosed include my FAFSA Education Family Contribution (EFC) score, Grade Point Average, information about my field of study and future college plans, as well as other personally identifiable information from my education records. I acknowledge that the purpose of the disclosure is to assist the Marshalltown Community College Foundation in evaluating my eligibility for scholarships.*

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

