

**Otha Grimes/Francis Tuttle  
Memorial Scholarship**

**for Adult Career and  
Technology Center Students**

Revised 08/14/2015



**Application**

**Spring      Fall**

**PLEASE COMPLETE APPLICATION AND SUBMIT TO FINANCIAL AID DIRECTOR BY  
SCHOOL'S DEADLINE. APPLICATION MUST BE TYPED.  
(DO NOT COPY A PREVIOUSLY SUBMITTED APPLICATION)**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Home Phone Number:** \_\_\_\_\_ **Cell Number:** \_\_\_\_\_

**Technology Center (please include campus):** \_\_\_\_\_

**Is the applicant applying as an in-district      or out-of-district**

**Program in which you are enrolled:** \_\_\_\_\_

**Date you started in the program:** \_\_\_\_\_

**Date you plan to complete the program:** \_\_\_\_\_

**Name of the instructor who can document your program endeavors:** \_\_\_\_\_

**Define your career objective:**

**What circumstances dictate your financial need for scholarship assistance (please be specific):**

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**List all educational expenses (specify the item and cost of each item for the current semester):  
(Only list allowable scholarship expenses, refer to guidelines)**

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**List all financial support you have or plan to receive this semester:  
(Pell or other scholarships – specific the support and amount)**

_____	\$ _____
_____	\$ _____
_____	\$ _____

**Total amount of scholarship funds you are requesting this semester:** \$ \_\_\_\_\_  
(Note: Application will NOT be considered unless amounts are indicated.)

**I hereby certify that the above information is correct to the best of my knowledge, and that I am at least 18 years of age. Incomplete information may jeopardize this application from being considered.**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Applicant's Signature**

**Scholarship must be applied towards students' specific needs identified above.**

(Applicant may attach a separate page of additional information or for clarification of any item(s) in application.)

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