

HIGH SCHOOL TO HIGH WAGE SCHOLARSHIP ARKANSAS TECH UNIVERSITY-OZARK CAMPUS Deadline: April 1

Applying For: Fall Year _____

Name:			Birthdate:	
Address:				
City	State	Zip	Telephone #:	
Name of High School:		Graduatio	n Date:	
Do you have college credit? Y	esNo	_ If yes, from whe	re?	
Did you attend Arkansas Tecl	n Career Cent	er (ATCC)? Yes	No If yes, please list:	
Are you currently employed?	Yes No_	If yes, where?		

Please submit the following required information (preferably typed) with this application:

- A) A letter of application outlining your career goals, your academic and personal accomplishments and any extracurricular activities in which you are involved (1 page maximum);
- **B**) A letter of recommendation from a teacher, employer, high school counselor or someone in your community.

Note: All applicants need to complete the FAFSA (Free Application for Federal Student Aid) prior to being awarded this scholarship. More information is available online at atu.edu/ozark/financialaid and fafsa.ed.gov.

Applicants will also be considered for all other Arkansas Tech-Ozark Campus Scholarships.

All applicants need to have applied and been accepted for admission to Arkansas Tech-Ozark Campus in order to be considered for an Arkansas Tech-Ozark Campus Scholarship.

Signature

PLEASE SUBMIT APPLICATION TO: ARKANSAS TECH UNIVERSITY-OZARK CAMPUS FINANCIAL AID OFFICE 1700 HELBERG LANE OZARK, AR 72949 OZARK.FINAID@ATU.EDU Date

*Incomplete or late applications will not be considered.