

VIRGINIA WESTERN
COMMUNITY COLLEGE

WE'LL TAKE YOU  THERE

OFFICE OF FINANCIAL AID AND VETERANS' AFFAIRS

SCHOLARSHIP INFORMATION FORM

Please complete this form completely. If you have received a letter with the scholarship check, please submit this form, letter, check and any other documentation regarding the award to Virginia Western Community College's Office of Financial Aid and Veteran's Affairs.

Student Name: _____

Student EMPLID: _____

Student Phone #: _____

Student email: _____@email.vccs.edu

Scholarship Information:

Scholarship Sponsor/Name: _____

Scholarship Contact Information: _____

Amount of scholarship: _____

Academic year in which scholarship should be applied: _____

Semester to be applied (circle one): Fall only Spring only Fall/Spring Summer

****Please note that if the scholarship check is made out to VWCC *and* the student, that you, the student, endorse the back side of the check. If you do not sign the check, this could delay processing.**

Student Signature

Date