ROBERT BRANDT SCHOLARSHIP APPLICATION

Name:	P	hone:
Street Address:		
City:	State:	Zip:
Vantage Career Cente	er Program you completed yo	our Junior and Senior Year:
What was your home s	school:	
Adult Education Prog	ram you are enrolling in:	
Type of Certification/l applicable:	Degree you plan to obtain aft	er completion of this program, if

Please list any other scholarship(s) you have applied for and indicate whether or not you have received any scholarship monies:

Name of Scholarship	Amount	Were you awarded this scholarship?

Please list any financial assistance you expect to receive: (Federal Financial Aid, Ohio Means Jobs, etc.):

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Employment (List the most recent first):

Job or Kind of Work	Employer	Dates of Employment	Hours per Week

Community and Volunteer Activates:

Kind of Work	Agency or Organization	Years Involved	Special Awards

Name:	Name:	Name:
Address:	Address:	Address:
City, State, Zip:	City, State, Zip:	City, State, Zip:
Phone:	Phone:	Phone:
Relationship:	Relationship:	Relationship:

List three References (No more than one family member may be given):

In what way would money from this scholarship help pay the cost of your education?

(2-3 sentences)

Are there special financial or other circumstances, if any, that the committee should take into consideration when reviewing your application?_____

ESSAY: Attach a typed, double-spaced, well-written essay of <u>at least one page length</u> and include the following:

- Explain your educational and career goals and how you have prepared for these goals.
- Explain how Vantage played a part in preparing you for these goals-please include how you overcame any academic challenges, if applicable.
- Explain, in detail, why you feel you should receive this scholarship.

Please return completed application to the Financial Aid Office at Vantage Career Center