

**Quota Club of Northern Colorado
Scholarship Application**



P.O. Box 1415
Fort Collins, Colorado 80522
quotaofnortherncolorado@gmail.com

Applicant Information

Name: First _____ Last _____

Birthdate Mo _____ Day _____ Year _____

Mailing Address:

Street or PO Box _____ City _____ State _____ Postal Code _____

Email Address: _____

Phone Number: _____

College Student ID if known: _____

What is the best way to communicate with you, (email, phone, other)? _____

Do you have a hearing loss that might qualify as educationally significant? Y ___ N ___

Name of High School and City _____

Do you currently have other financial aid? If so, how much and from whom?

High School Students:

What month and year will you graduate? Mo _____ Yr _____

Have you been accepted to a college? Y _____ N _____ Which one(s)? _____

What major are you interested in? _____

College Students:

What college are you attending? _____

What year are you? _____

What month and year do you plan to graduate Mo _____ Yr _____

What is your major and degree program? _____

Please supply two References:

These may be from an educator, interpreter of the Deaf who worked with you, high school counselor, or a supervisor or volunteer coordinator from a paid or unpaid job.

Name _____

Phone _____

Email _____

How you know this person? _____

Name _____

Phone _____

Email _____

How you know this person? _____

Essay

Please write a short essay on a separate document detailing the following:

1. Tell us a little about yourself
2. What motivates you to attend college
3. How would this scholarship assist you in achieving your goals
4. How you plan to contribute to society upon completion of your degree.

Please send completed application and essay to:

Quota Club of Northern Colorado
P.O. Box 1415
Fort Collins, Colorado 80522
quotaofnortherncolorado@gmail.com

Application may also be submitted via email to: quotaofnortherncolorado@gmail.com