

Scholarship Request

Please complete this form **only** if requesting a scholarship for the GTL 2018-2019 program. Tuition is \$2,000 and due by August 1, 2018.

Financial Status

Name (printed) _____

Financially self-supporting (program not funded by your employer) ___ Yes ___ No

Financially contribute to your family income ___ Yes ___ No

Number of persons supported by family income _____

Please explain the reason you are requesting a scholarship.

Amount of scholarship requested \$_____

I certify that the above information is an accurate reflection of my income and expenses. Any additional information that I feel is relevant to this application is attached on a separate document.

Date _____ Signature _____