

**FIRST COAST TECHNICAL COLLEGE SCHOLARSHIP
SCHOOL YEAR 2016-17
FOR GRADUATING 2016 HIGH SCHOOL SENIORS**

First Coast Technical College Scholarships are awarded through an application submission to First Coast Technical College and require approval of the Scholarship Committee. Scholarships will be limited to funds available for this purpose.

The scholarship will be issued for the program requested on the application and the award may only be used for this program. Scholarships are not transferable to another program at FCTC.

The scholarships are awarded for twelve (12) months and cover registration and tuition fees. Additional costs which may include additional program time, books, supplies, certification exams and uniforms will be the responsibility of the student. Contact the Financial Aid Office at (904) 547-3511 or (904) 547-3512 or Career Navigator program at (904) 547-3377, if you should need additional assistance with your expenses. Applications for the 2016-2017 school year must be submitted to the college no later than **April 1, 2016**. Scholarship applicants will be required to take the TABE test. Appointments will be scheduled for testing. Scholarship recipients will be notified of the scholarship awards within four to six weeks. The FCTC Scholarship award is contingent on the successful attainment of all requirements for high school graduation. Scholarship applicants must meet all requirements for the program they plan to attend.

REQUIREMENTS

- 1. A graduating high school senior who is considered to have outstanding qualities and/or one who will receive specific benefit from enrolling at First Coast Technical College.**
- 2. Recommendation by an instructor and a guidance counselor from the applicant's school.**
- 3. Evidence that applicant desires career training at the First Coast Technical College**
- 4. A Grade Point Average of 2.5 or higher.**
- 5. Be a Florida resident.**
- 6. A completed scholarship application from the student with the above required information.**

INSTRUCTIONS:

- 1. Complete the attached First Coast Technical College Scholarship Application.**
- 2. Have an instructor and a guidance counselor complete the recommendation portion of the scholarship form.**
- 3. Mail completed application to:**
First Coast Technical College
Scholarship Program
2980 Collins Avenue
St. Augustine, Florida 32084-1921

FIRST COAST TECHNICAL COLLEGE SCHOLARSHIP APPLICATION 2016-2017

Scholarships are available for
the following technical programs:

<u>Program</u>	<u>Campus</u>
Landscape & Turf Management	SAC
Nursery Management	SAC
Pest Control Operations	SAC
Air Conditioning, Refrigeration and Heating	SAC
Automotive Service Technology	SAC
Building Trades & Construction Design Technology	PCC *Anticipated start date August 2016
Commercial Foods and Culinary Arts	SAC
Cosmetology	SAC/PCC/GCS
Digital Design	SAC
Diesel/Medium and Heavy Duty Truck and Bus	SAC
Welding Technology	SAC/PCC
Health Programs**	
Dental Assisting	SAC
Medical Assisting	SAC
Nursing Assistant	SAC
Massage Therapy	GCS
Patient Care Technician	PCC
Practical Nursing*	*location TBD
Pharmacy Technician	GCS
Emergency Medical Technician	NC
Firefighter	NC
EMT/Fire	NC

SAC: St. Augustine PCC: Palatka GCS: Green Cove NC: North Campus St. Augustine

****All Health Programs require an additional application. You must meet the qualifications for the specific program to be eligible to enroll.**

***Practical Nursing requires additional testing, contact 904-547-3511.**

Any program not specifically listed above will not be covered by the scholarship.

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PLEASE PRINT

Last Name: _____ **First Name:** _____

Social Security # _____

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Email Address: _____

Phone Number: _____ **Date of Birth:** _____

High School: _____ **Graduation Date:** _____

Are you currently or have you previously taken any vocational/technical courses?

Yes _____ **No** _____

Please List:

Are you currently a Dual Enrolled Student at FCTC? **Yes** _____ **No** _____

If so, which program? _____

Primary Program Choice: _____

Secondary Program choice if applicable:

List any employment, awards, interests or community service:

Applicant's Signature: _____	Date: _____
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Parent/Guardian Signature: _____	Date: _____
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TO BE COMPLETED BY AN INSTRUCTOR (PLEASE PRINT)

Instructor's Name: _____ Program: _____

Instructor's recommendation for a technical scholarship:

Instructor's Signature: _____ Date: _____

TO BE COMPLETED BY A GUIDANCE COUNSELOR (PLEASE PRINT)

Guidance Counselor's Name: _____

Grade Point Average (overall unweighted): _____

Class Ranking: _____

Grade Point Average for vocational program(s) (if applicable): _____

Specify program(s): _____

Passed testing requirements and eligible for high school graduation. YES ___ NO ___

If no, what needs to be completed: _____

Does student require any special accommodations? IEP, etc. _____

Guidance Counselor's recommendation for a technical scholarship:

Guidance Counselor's Signature: _____ Date: _____

Date of Senior Awards Ceremony: _____

Mail completed application to: **First Coast Technical College
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2980 Collins Avenue
St. Augustine, Florida 32084-1921**