## Submission for this application is due by February 14,2025



## 2024-2025 Golden LEAF Community College Scholarship Application



**Instructions:** Complete this application and return it to the college's Financial Aid Office or the office designated by the college. Eligible students must reside in a qualifying county as determined by the Golden LEAF Foundation

Personal Information:			
Full Name:	Student ID Number:		
Address:	City:	St: Zip:	
Phone Number:	Email:		_
NC County of residence:	How long have yo	u lived in the county listed?	
(To be eligible for an initial award Foundation)	d, your permanent residence mut be in a qualif	ying county determined by the Golden LE	AF
Educational Information:			
Community College you are a	tending:		_
WCE course/pathway you are	enrolled/enrolling in:enrolled/enrolling in:enrolled/enrolling in:en a credentialing program that is at least 96 ho		-
Other Information:			
• Have members of you	r immediate family worked for or owned a	a farming or agricultural related busine	ess?
yes no			
Have you or members	s of your immediate family been employed	l in traditional industries such as furnit	ure, textiles
or tobacco manufacti	ıring? yes no		
<ul> <li>Has anyone in your ho</li> </ul>	ousehold lost their job in the past two year	rs? yesno	
Has anyone in your ho	busehold transitioned from a full-time job	to a part-time job? yes no	
Applicant Certification:			
	equirements of this scholarship. I hereby decla	are that the information provided on this f	orm is
complete and correct to the best		•	
Applicant Signature:		Date:	