

COLLEGE CREDIT CERTIFICATE/OCCUPATIONAL CERTIFICATE
MUST ATTEND SOUTH FLORIDA STATE COLLEGE
Up to \$1000.00

Return by February _____ to: Lake Placid High School Guidance Office

NAME _____ PHONE# _____

ADDRESS _____

Anticipated graduation date _____ Rank in Class of 2021 _____

GPA score _____ Have you passed the FCAT? Yes _____ No _____ Type of program you plan to pursue _____ (Eligibility requirement for the scholarship- must be at least one year in length)

SOUTH FLORIDA STATE COLLEGE- Have you been accepted? Yes _____ No _____

List any school or community projects, activities, honors, awards, clubs, etc. that you have been associated with during your high school years (if needed, use the back of the application)

Have you applied for financial aid? Yes _____ No _____ When? _____

Do you work? If so, where _____ Your weekly income _____

Will you receive funds from any program or from possible future employers in this field? Yes _____ No _____ Please list the source of these funds _____ Would you be available for an interview? Yes _____ No _____

Please attach a brief description of your career plans and expectations and why you are interested in this chosen field. Include any background experience in this field.

Date _____ Student Signature _____

Please complete all the questions in order to be eligible for an award.

