



APPLICATION

Twenty-first Century Scholars GEAR UP Summer Scholarship 2005

State Student Assistance Commission of Indiana, 150 W. Market, Suite 500, Indianapolis, IN 46204

Application Instructions

1. As a Scholar, you must complete the Applicant Information section below, answer all questions and sign the Scholar Agreement on the second page of this application form.
2. You must attach a summer school schedule to this application.
3. You must submit the application to the Twenty-first Century Scholars GEAR UP Summer Scholarship representative at **both** the college where you plan to take summer classes and where you plan to attend in the fall. Each representative will complete a page 2 section of the application.
4. You must make sure that the application is returned to the office listed above by the **Fall college representative** as listed on page 2 of this application.
5. **Incomplete applications will be returned to you at the address below.**

APPLICANT INFORMATION (TO BE COMPLETED BY APPLICANT)

1. Name (please print): _____
(first) (last)

2. Social Security Number: _____ - _____ - _____

3. Date of birth: ____ / ____ / ____
mo day year

4. Permanent mailing address: _____
(street)

(city) (state) (zip code)

5. Permanent telephone number: (_____) _____ - _____

6. The following questions pertain to the high school from which you graduated:

- Name of high school: _____
- City where the high school is located: _____
- High school graduation date: ____ / ____
mo year
- Grades I received during high school (*check one*):
 Mostly A's Mostly B's Mostly C's Mostly D's Mostly F's

Important note: The GEAR UP Summer Scholarship will pay for credit courses that are considered academic and required for degree completion. Non-credit or courses that are not required for degree completion will not be approved under the GEAR UP Summer Scholarship. You are responsible for any charges not covered under the Scholarship.



State Student Assistance Commission of Indiana
Twenty-first Century Scholars Program

SCHOLAR AGREEMENT

I agree that the acceptance of this scholarship indicates that I will be enrolled in a degree-seeking program on a full-time basis at a degree-granting institution during the 2005-2006 academic year or that I will use this scholarship to finish up in the summer months and complete my degree. I hereby authorize my college or university to release any needed information, including grades received during the summer session, to the State Student Assistance Commission of Indiana (SSACI). Any information received by SSACI will be used solely for record-keeping purposes.

Scholar's Signature: _____ Date signed: ____/____/____
mo day year

SUMMER SCHOOL INFORMATION (TO BE COMPLETED BY THE SUMMER SCHOOL)

College/university: _____

School Code (Title IV): _____

(Print school official's name and title) Signature: _____
(Certifying school official)

Official's complete mailing address

Phone number _____ Email address _____

SCHOOL CERTIFICATION (TO BE COMPLETED BY THE FALL SEMESTER SCHOOL)

I hereby certify that _____ is enrolled and registered for summer classes at the school listed above. At the beginning of the 2005 summer session, the student will have earned _____ college credit hours with a cumulative GPA of _____ (if the student has no college record, mark both as N/A).

College/university: _____

School Code (Title IV): _____

(Print school official's name and title) Signature: _____
(Certifying school official)

Official's complete mailing address

Phone number _____ Email address _____

Date signed: ____/____/____
mo day year

For Office Use Only	
Application Approved: Yes _____ No _____	
If application denied, explain: _____ _____ _____	
Signature: _____	Date: ____/____/____ mo day year