OCC FOUNDATION SCHOLARSHIP PROGRAM
Application Form for the 2009-10 Academic Year

Women's Auxiliary of Master Plumbers Scholarship

Name of Applicant _____ M___F___
First, Middle & Last Name Using All Printed Capital Letters

Mailing Address_____
Street State City Zip

Phone Number _____ Email _____

OCC Major _____ OCC Student ID# or SS#_____

GPA as of 8/30/09 _____ (Student must have at least 2.0) Anticipated Date of Graduation_____

Name of Relative in the plumbing industry _____ Relationship_____

I have already filed the 2009-2010 Free Application for Federal Student Aid (FAFSA). Yes ____ No ____

Please share below your career goals and your interest in maintaining pure water and providing suitable solid and liquid disposal plants. Please print. Or, you may provide this information on a separate sheet of paper that can be attached to this application.

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The information provided on this application is true. I give Onondaga Community College permission to use it and the information on my academic transcripts during the scholarship selection process.

Signature _____ Date_____

To apply for this scholarship you must:

Complete and return this application to: :
Onondaga Community College
Financial Aid Office
4585 West Seneca Turnpike
Syracuse, New York 13215