



The information provided on this form will be used by the GACTC Scholarship Committee to select recipients for specific scholarships. It is important that you give complete details concerning your workforce/college/career plans, activities and financial information.

DEMOGRAPHIC INFORMATION

FULL NAME (ex. John W. Smith): _____

SCHOOL ID: _____

PHYSICAL HOME ADDRESS (STREET/CITY/STATE/ZIP): _____

CELL PHONE#: _____

PERSONAL EMAIL ADDRESS: _____

DATE OF BIRTH: _____

PARENT/GUARDIAN FIRST AND LAST NAME(S): _____

PARENT/GUARDIAN EMAIL ADDRESS: _____

ACADEMICS

Which GACTC Program Of Study Are You Enrolled In?

<input type="checkbox"/>	Automotive Technology	<input type="checkbox"/>	Automotive/Diesel Technology
<input type="checkbox"/>	Baking & Pastry Arts	<input type="checkbox"/>	Cabinetmaking/Finished Carpentry
<input type="checkbox"/>	Carpentry/Construction	<input type="checkbox"/>	Collision Repair & Refinishing Technology
<input type="checkbox"/>	Computer & Networking Technology	<input type="checkbox"/>	Computer Programming
<input type="checkbox"/>	Cosmetology	<input type="checkbox"/>	Culinary Arts
<input type="checkbox"/>	Dental Assistant	<input type="checkbox"/>	Digital Communications
<input type="checkbox"/>	Electrical Trades	<input type="checkbox"/>	Electro Mechanical Engineering Technology
<input type="checkbox"/>	Emergency Services	<input type="checkbox"/>	Engineering Design Technologies
<input type="checkbox"/>	Graphic Design	<input type="checkbox"/>	Health Occupations
<input type="checkbox"/>	HVAC/R	<input type="checkbox"/>	Logistics & Supply Chain Management
<input type="checkbox"/>	Masonry	<input type="checkbox"/>	Powersports & Equipment Technology
<input type="checkbox"/>	Precision Machining	<input type="checkbox"/>	Service Occupations
<input type="checkbox"/>	Welding Technology	<input type="checkbox"/>	

What High School Do You Attend?

<input type="checkbox"/>	Altoona Area HS	<input type="checkbox"/>	Bellwood-Antis HS
<input type="checkbox"/>	Bishop Guilfoyle HS	<input type="checkbox"/>	Blair County Christian HS
<input type="checkbox"/>	Central HS	<input type="checkbox"/>	Claysburg-Kimmel HS
<input type="checkbox"/>	Glendale Jr-Sr HS	<input type="checkbox"/>	Great Commission HS
<input type="checkbox"/>	Hollidaysburg Area HS	<input type="checkbox"/>	Tyrone Area HS
<input type="checkbox"/>	Williamsburg-Community HS	<input type="checkbox"/>	Cyber through _____
<input type="checkbox"/>	Home Schooled	<input type="checkbox"/>	Other _____

What Courses Do You Take At Your High School?

<input type="checkbox"/>	Honors	<input type="checkbox"/>	Academic (College Bound)
<input type="checkbox"/>	General	<input type="checkbox"/>	Other _____

GACTC SkillsUSA

<input type="checkbox"/>	10 th	<input type="checkbox"/>	11 th	<input type="checkbox"/>	12 th	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	SkillsUSA Member
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	SkillsUSA Officer

High School Activities/Clubs/Athletics and what grade(s) you participated in them.

<input type="checkbox"/>	10 th	<input type="checkbox"/>	11 th	<input type="checkbox"/>	12 th	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Fall Sports (Football, Volleyball, Cross Country, etc.)
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Winter Sports (Basketball, Wrestling, Swimming, Track, etc.)
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Spring Sports (Track, Baseball/Softball, Volleyball, etc.)
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Academic Clubs (Student Council, Math, FBLA, SADD, etc.)
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Music/Drama (Marching/Concert/Jazz Band, Productions, etc.)
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Esports
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Other: _____

Check all of the Community Service Activities/Volunteer Work below that you have participated in and what grade(s) you performed this type of work.

<input type="checkbox"/>	10 th	<input type="checkbox"/>	11 th	<input type="checkbox"/>	12 th	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	As a Volunteer Firefighter
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	At the Library
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	At Church
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Litter Clean Up
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	At a Nursing Home
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Other: _____
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Other: _____
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	Other: _____

Tell us about the OUTDOOR ACTIVITIES you participate in (skiing, swimming, hunting, fishing, etc.):

Special Awards or Recognition that you have received and the grade(s) you are/were in when you received this award/recognition.

10 th		11 th		12 th		
						National Technical Honor Society (@ GACTC)
						National Honor Society (@ High School)
						Other: _____
						Other: _____
						Other: _____

List your Work Experience with Position and Month/Year that you worked from 10th – 12th grade.

PLACEMENT OF EMPLOYMENT & POSITION

MONTH/YEAR

_____	_____
_____	_____
_____	_____

Family Income (Combined Gross Family Income)

Less than 20,000	Between 20,001 and \$30,000
Between \$30,001 and \$40,000	Between \$40,001 and \$50,000
Between \$50,001 and \$60,000	Between \$60,001 and \$70,000
Between \$70,001 and \$80,000	Between \$80,001 and \$90,000
Between \$90,001 and \$100,000	Over \$100,000

- Father/Guardian Occupation and/or Career _____
- Mother/Guardian Occupation and/or Career _____
- Number in household (parents and children under the age of 21) _____
- Number of children attending post-secondary education for the Fall 2023 other than yourself _____
- Have you received any other scholarship offers to date? _____
(Acceptance of other scholarships does not disqualify you from receiving other scholarships)

What Are Your Future Plans?

Workforce/Employment	College/University (2, 4 or more years)
Technical Training/School (2 or less years of training)	Military/Branch: _____

Have You Been Accepted To Any Technical Training School Or College/University? If yes, please list the school(s)/college(s):

Please check each of the scholarships for which you are applying.
Please double-check the criteria for each scholarship to be sure you qualify for them.

Sgt. Brandon E. Adams Information Technology Education Scholarship	Piotr Marciniak Memorial Scholarship
Timothy A. Bartek Memorial Scholarship	Richard L. McEldowney Scholarship
Daniel A. Clark Memorial Scholarship	The P. Julies and Pamela J. Patt Memorial Scholarship
Franklin M. Finelli, II Memorial Scholarship	Reliance Bank Scholarship
Captain Bob Gallardy Memorial Scholarship	Joseph J. Schamris Memorial Scholarshp
Scott Garlick Memorial Scholarship	Aaron N. Stuckey Memorial Scholarship
Zack Hinish Foundation Scholarship – Nursing	Kathy Wagner Memorial Scholarship
Zack Hinish Foundation Scholarship – Special Education Major	S. Rodger Walters Educational Scholarship
Jane Purdy Hite and Robert Lee Hite Scholarship	George Woomer Memorial Scholarship
Zachary S. Hoover Memorial Scholarship	

Please bring the following **REQUIRED** information along with this scholarship application to the Office of Work Based Learning, 2nd Floor to Mrs. Quist or Ms. Emerick:

1. This COMPLETED Scholarship Application
2. Unofficial Transcript from your High School Guidance Counselor
3. Scholarship Recommendation Rubric from your GACTGC Program Teacher (ask your GACTC Instructor to fill this out). A copy is attached to this application.

FAILURE to bring the above three items with this scholarship application will be considered **INCOMPLETE** and **NOT ACCEPTED**.

SCHOLARSHIP RECOMMENDATION RUBRIC

STUDENT NAME
PROGRAM
YOUR NAME AND TITLE

Rate your overall experience with the student (based on scale of 0-5 with 5 being the best)	
Rate the student's grades (95-99=5 pts., 90-94=4 pts, 85-89=3 pts, 80-84=2 pts., 79 or below=0 pts.)	
Rate the student's attendance (0-3 days absent=5 pts, 4-6 days absent=4 pts, 7-9 days absent=3 pts, 10-12 days absent=2 pts, 13-14 days absent=1 pt, 15+ days absent- 0 pts)	
Rate the student's activities (based on a scale of 0-5 with 5 being very involved)	
Rate the student's awards/achievements (based on a scale of 0-5 with 5 being the highest)	
Rate the student's essay, if required (based on a scale of 0-5 with 5 being the best)	

Additional comments/concerns relevant to this student:

ESSAY PAGE