

Garland C. and Verline Scaggs Memorial Scholarship

Southern West Virginia Community and Technical College Funds administered by the Southern West Virginia Community College Foundation

Name	Date		
Address			
City	State	County	
Social Security Number/ID#:	Telephone:		
County of Residence:	Date	Date of birth:	
If graduated, name of School		Year	
If yes, what was your current GPA?_	ACT So	core	
Are you presently attending Southern	n West Virginia Com	munity and Technical College?	
yes no			
Please provide a brief statement con	cerning your backgr	ound and your college plans:	
Are you receiving other scholarships If so, list source and amount		llege financial aid? yes no	
	need or special circ	ent of Southern West Virginia Community cumstances surrounding your attending	
PLEASE READ AND SIGN:			
Southern West Virginia Community and T Foundation to verify all information contain information to the College and Foundation f	echnical College and the ed in this application. A for verification purposes publicity purposes. It is	occurate to the best of my knowledge. I authorize the Southern West Virginia Community College any institution, agency, or individual may release. I understand the College and Foundation may my responsibility to inform the Financial Aid Office	
Student's Signature		 Date	

It is the policy of Southern West Virginia Community and Technical College to provide equal opportunities to all prospective and current members of the student body, faculty, and staff on the basis of individual qualifications and merit without regard to race, sex, religion, age, or national origin.