The Community Foundation For Crawford County

COME HOME SCHOLARSHIP APPLICATION

Applicant Information

Name			
Current Address			
			Zip
[PLEASE NOTE: Applicants n	nay NOT be already rest	iding within Crawford County	at the time of their application.]
Email	Cell Phone		
Have you previously been	a resident of Craw	ford County?	
If yes, please list the dates			
Do you have immediate fa			
If yes, please explain (relat	ion and duration o	of residency)	
Are you married? □Yes □N	0		
If yes, what is your spouse	's name?		
What is their highest degre			
Education Data			
□High School Graduate O	R □GED		
If high school graduate, fro	om what high scho	ol did you graduate?	
		HS Grad	uation Year
If GED, date of certificate of			
What is your highest degre			ation and where did you

Graduatio	n Date
Do you ha	ve outstanding student debt associated to above degree?
If yes, who	at is the total amount owed?
Employme	ent
Are you cu	urrently employed in Crawford County?
If yes, who	ere are you currently employed?
What is yo	our current job title/position?
•	not currently employed in Crawford County, what is your plan to find or create
Additiona	l Questions
Please ans	swer the following questions in two pages or less:
1.	Why do you want to live and work in Crawford County?
2.	Do you plan to buy a home? If so, in what community?
3.	What are your career goals?
4.	How do you see yourself getting involved in the local community outside of your job?
Additiona	I Requirements
Please att	ach:
1.	Proof of outstanding student debt (student loan statement, etc.)
2.	If applicable, proof of employment in Crawford County.
	ure verifies that my application and accompanying materials are true and correct to f my knowledge.
Signature	

Revised Feb 2021