



Tysons Campus
8620 Westwood Center Dr.
Vienna, VA 22182
TEL. 703-206-0508

Centreville Extension
5940 Centreville Crest Ln.
Centreville, VA 20121
TEL. 703-266-0508

Silver Spring Extension
12125 Veirs Mill Rd.
Silver Spring, MD 20906
TEL. 301-929-0565

Scholarship/Grant Application

Name
Last First M.I.

Date of Birth / / **Gender** Male Female
MM / DD / YY

Address
Street Address Apt / Unit #

City State Zip Code

Phone () - () -
Cell Home

Email

Program

Program Associate / Certificate

Request Columbia College Academic Scholarship (up to \$1,000/\$200 per session)
 Presidential Grant (up to \$2,202/\$367 per session)
Supporting (1) Transcript
Documents (2) Financial Statement

Intended Session 2018 Spring I 2018 Spring II 2018 Summer 2018 Fall 2018 Winter
 2019 Spring I 2019 Spring II 2019 Summer 2019 Fall 2019 Winter

I understand that upon receipt of the scholarship, I will make a commitment to attend the all required courses regulated by Columbia College and maintain satisfactory Academic progress toward successful graduation/completion of enrolling program.

Student Signature

_____/_____/_____
Date