

COMMUNITY COLLEGE OF PHILADELPHIA
WANAMAKER SCHOLARS PROGRAM

Scholarship Application for 2021/2022

The Wanamaker Institute of Industries (the "Fund Sponsor") and Community College of Philadelphia (the "College") have partnered to establish the Wanamaker Scholars Program to provide financial support to Philadelphia residents meeting established criteria and enrolling in selected training programs.

Instructions to Applicants

Carefully read, fully complete, and, where indicated, sign and date the application. Incomplete and unsigned applications will not be considered. Applicants will be contacted regarding the status of their application. Applicants must be Philadelphia residents, at least 18 years of age, and possess a high school diploma or GED. Finalists for scholarships must meet all eligibility requirements of their selected training program, and may be required to participate in an interview.

Applicant's General Information

Please indicate the training program for which you are applying for scholarship support:

- | | |
|--|---|
| <input type="checkbox"/> Advanced Manufacturing - CNC Precision Machining | <input type="checkbox"/> Dental Assistant |
| <input type="checkbox"/> Advanced Manufacturing - Gas Distribution Pipeline | <input type="checkbox"/> Dialysis Technician |
| <input type="checkbox"/> Advanced Manufacturing – Mechatronics | <input type="checkbox"/> EKG Technician |
| <input type="checkbox"/> Advanced Manufacturing – Welding | <input type="checkbox"/> Electronic Health Records Management |
| <input type="checkbox"/> Amazon Web Services, DevOps, Cloud Computing Bootcamp | <input type="checkbox"/> HVAC Technician |
| <input type="checkbox"/> Bookkeeping | <input type="checkbox"/> Massage Therapy |
| <input type="checkbox"/> Certified Production Technician | <input type="checkbox"/> Nurse Aide |
| <input type="checkbox"/> Child Development Associate | <input type="checkbox"/> Pharmacy Technician |
| <input type="checkbox"/> Clinical Medical Assistant | <input type="checkbox"/> Phlebotomy |
| <input type="checkbox"/> CompTIA A+ | |

Name _____ J# (if known) _____

Street Address _____

City, State, Zip _____

Telephone (Home) _____ (Cell) _____

Email _____ Fax _____

Date of Birth (Month/Day/Year) _____

Referred By _____

Are you currently employed? Yes No

If yes, will this training help you retain your job? Yes No

If yes, will this training allow you to receive a better wage? Yes No

Employer Name _____

Employer Address _____

Employer Telephone _____

Highest Level of Education:

- | | | |
|---|---|---|
| <input type="checkbox"/> High School Graduate | <input type="checkbox"/> GED | <input type="checkbox"/> Some college courses |
| <input type="checkbox"/> Associate Degree | <input type="checkbox"/> Bachelors Degree | <input type="checkbox"/> Other (please specify) _____ |

How long have you resided in the city of Philadelphia? _____ year(s) _____ month(s)

Annual Income or Hourly Rate \$ _____ How many people live in your household? _____

Have you previously participated in the Wanamaker Scholars Program? Yes No

Have you ever attended Community College of Philadelphia? Yes No

Please indicate Source of Funds Paying for your Education: _____

Essay

As part of the application process for the Wanamaker Scholars Program, please prepare a brief essay in response to the questions below. Your essay must be typed, minimum font size of 10 point, and should not exceed one page in length.

Essay Question: In which of the Wanamaker-sponsored training programs offered by Community College of Philadelphia are you interested and why did you select this training program? How do you plan to use the knowledge and skills gained through this training program to improve your career options?

I hereby promise that all of the information entered on this application is accurate and truthful to the best of my knowledge. I understand that any false statement can invalidate my candidacy for scholarship assistance.

CONSENT TO RELEASE INFORMATION

I understand that my personally identifiable information in my education records is protected from disclosure under the Family Educational Rights and Privacy Act ("FERPA") with certain exceptions. By signing and submitting this application, I consent to the disclosure by the College of all information contained within this application to the scholarship selection committee and the Fund Sponsor for purposes of evaluating my application. I understand that the scholarship selection committee is comprised of College employees and officials as well as representatives of the Fund Sponsor. I understand I may revoke this Consent upon providing written notice to the College. I further understand that until this revocation is made, this consent shall remain in effect. I further consent that if I am awarded a scholarship, the College and the Fund Sponsor may publicly announce and/or acknowledge my participation in this scholarship program in support of their marketing and fundraising efforts.

Signature of Applicant

Date

Email your completed application packet to: Hannah McGarry, Director of Operations, at hmcgarry@ccp.edu