

## Gwinnett Tech Foundation Developmental Studies Scholarship

Name \_\_\_\_\_  
 Home Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ E-mail \_\_\_\_\_  
 Student # \_\_\_\_\_ GPA \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Sex: M \_\_\_\_\_ F \_\_\_\_\_ Ethnic Background \_\_\_\_\_  
 Quarter in which developmental studies will be taken \_\_\_\_\_  
 Proposed program of study \_\_\_\_\_

### EDUCATION BACKGROUND

Name of School	City	State	From	To

### AWARDS AND RECOGNITIONS

(list below any recognitions which you have received from school, community, employment, etc.)

Honor, Awards, Recognition	Source	Date

### COMMUNITY SERVICE

Organization	Activity	Dates

### EMPLOYMENT DATA

Type of Job	Employer	Dates

**Deadlines: February 15<sup>th</sup>, May 15<sup>th</sup>, August 15<sup>th</sup>, November 15<sup>th</sup>**

Applications as described in criteria must be submitted to the  
**Gwinnett Tech Foundation**  
**Room 405, Building 100**  
**5150 Sugarloaf Parkway**  
**Lawrenceville, GA 30043**

<b>Office Use Only</b>	
Approved _____	GPA _____
Not Approved _____	
Date _____	