

Lilburn Woman's Club Scholarship Application Gwinnett Tech Foundation

Name _____
 Home Address _____
 City _____ State _____ Zip _____
 Phone _____ E-mail _____
 Student # _____ GPA _____ Date of Birth _____
 Sex: M _____ F _____ Ethnic Background _____
 Number in Household _____ Household Income _____
 Are you a single parent or do you come from a single parent household? _____
 Proposed program of study _____
 Are you a laid off worker? Yes _____ No _____

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

Position	Employer	Dates

Deadline: April 1st

Complete applications must be submitted to:
Gwinnett Tech Foundation
Room 405, Building 100
5150 Sugarloaf Parkway
Lawrenceville, GA 30043

Office Use Only	
Approved _____	GPA _____
Not Approved _____	US Citizen _____
Date _____	