

COLLEGE CLUB WEST SCHOLARSHIP

Financial Information—DUE MARCH 16, 2026

THIS PORTION OF THE APPLICATION MUST BE COMPLETED ON THIS FORM AND MAILED TO THE ADDRESS GIVEN BELOW.

Name_____Phone_____

Address_____

City_____State_____ Zip _____

Birthdate ____/____/____ e-mail address_____

College Club West requires that you verify your income by providing us with a copy of your 2025 Federal Tax Return (first page only). If this is not possible, send your 2024 return, plus your 2025 W-2s along with an explanation of why this is necessary. **Remove all Social Security numbers.**

<i>Self</i>	<i>2025 Income Total</i>	<i>2026Estimated Income</i>	<i>Spouse</i>	<i>2025 Income Amount</i>	<i>2026 Estimated Income</i>
Salary			Salary		
Unemployment Compensation			Unemployment Compensation		
Pensions			Pensions		
Alimony			Alimony		
Child Support			Child Support		
Worker's Comp			Worker's Comp		
ADC			ADC		
Social Security			Social Security		
Other (Explain)			Other (Explain)		

YEARLY EXPENSES AT THE SCHOOL YOU PLAN TO ATTEND:

<i>Expenses</i>	<i>School #1</i>	<i>School #2</i>
Tuition and Fees		
Books and Supplies		
Transportation		
Child Care		
Other		

If you have any special circumstances or unusual expenses, please attach an explanation.

FINANCIAL AID YOU ARE SEEKING

Please indicate the anticipated amount of award(s).

<i>Type</i>	<i>Amount</i>
Pell Grant	
Other Instructional Grant	
Scholarship(s)	
Veteran's Benefits	
Tuition Reimbursement	
Other	

Provide Name of Company/Corporation that will be reimbursing you.

RECOMMENDATIONS:

List the names and address of two persons (not including relatives) familiar with your school and/or community activities and ask them to write recommendations on the enclosed forms. Please print all information.

1. _____
 Name Address Position

2. _____
 Name Address Position

PERSONAL INFORMATION

Write a short essay no longer than 500 words on your personal educational and employment background, your present financial needs, your future plans, and goals. Continue on the back as necessary.

TERMS OF AGREEMENT

If I am granted a scholarship, I understand that the award is for one year only. My record must meet the standards of scholarship, service, character, and financial need as set by College Club West.

I certify that I am not a member of College Club West nor a relative of a member.

Signed _____ Date _____

DUE MARCH 16. 2026

RETAIN THIS PAGE FOR YOUR RECORDS

CHECK LIST

- _____ Completed online portion of application.
- _____ Completed financial information and essay portion of application and mailed
- _____ All official transcripts requested and sent or mailed.
- _____ Copy of 2024 Income Tax Return (first page only) mailed with **social security numbers removed**.
- _____ Two letters of recommendation requested to be mailed.
- _____ Signed Terms of Agreement form

ALL APPLICATION MATERIALS AND SUPPORTING DOCUMENTS ARE TO BE POSTMARKED ON OR BEFORE MARCH 14, 2025.

SEND ALL REQUESTED MATERIAL TO:

Judy Bates

31043 Old Shore Drive

North Olmsted, OH 44070

ccwscholarship@gmail.com

Direct questions to ccwscholarship@gmail.com.

College Club West scholarships, to be used for tuition only, will be granted to qualified Greater Cleveland women who will be chosen by the Scholarship Committee based on maturity, academic record, promise, goals, and financial need.

Candidate selections will begin in April 2025. By early May, final candidates will be called for interview appointments. The College Club Scholarship Committee will interview all finalists in May 2025. Recipients will be notified within a few days. Recipients are invited to the May 17, 2025, scholarship luncheon.