

## **FALL AND SPRING SEMESTER 2009-2010 University Partnership Empowerment Award**

The University Partnership Empowerment Award (UPEA) is a privately funded award intended to help University Partnership students achieve a college education and training on LCCC's campus with a University Partner. The UPEA is intended to provide financial assistance to students in need empowering their pursuit of higher education. **All University Partnership students with need are invited to apply!**

The amount of the award varies per student and it can be used to help pay for tuition, books, and other educational expenses. The UPEA is also intended to help cover other costs unique to some students such as child care, elder care, transportation, etc.

### **Eligibility Requirements:**

- Enroll in a minimum of one course for Fall Quarter or Fall Semester in a program leading to a degree or certificate with a University Partner.
- Possess a minimum 2.5 cumulative college grade point average.
- You must be a U.S. Citizen or an eligible non-citizen as defined by the U.S. Department of Education.
- Submit a copy of your 2009-2010 Free Application for Federal Student Aid (FAFSA) results reflecting your EFC. You can obtain this from [www.fafsa.ed.gov](http://www.fafsa.ed.gov).
- Only completed scholarship applications will be considered for funding.

### **Application Requirements Checklist:**

- Complete and return the attached UPEA application by May 31, 2009 to the LCCC Financial Services Center (LR 146).
- Submit an unofficial transcript from your University Partner along with your completed UPEA application.
- Submit a schedule or documentation of registration and charges from your University Partner along with the completed UPEA application.
- Submit a copy of your Free Application for Federal Student Aid (FAFSA) results reflecting your EFC. You can obtain this from [www.fafsa.ed.gov](http://www.fafsa.ed.gov).

### **Selection Process**

The Lorain County Community College Scholarship Selection Committee will review all completed and eligible applications. **Applications received without required documentation (listed above) will not be considered.** Selection will be based on the following:

1. Financial need as documented on the application;
2. Unusual circumstances or expenses as documented on the application, or
3. Academic Performance as evidenced on the LCCC or University Partner college transcript.

**If you have any questions or need further information, call:  
LCCC Financial Services Center, LR 146  
(440) 366-4034 or 1-800-995-5222 Extension 4034**

***Application Deadline is May 31, 2009***

**2009-2010 FALL AND SPRING SEMESTER  
UNIVERSITY PARTNERSHIP EMPOWERMENT AWARD**

Name: \_\_\_\_\_ Student No. \_\_\_\_\_

Social Security No.: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City County State Zip

Name of University Partner: \_\_\_\_\_ University Partner Degree: \_\_\_\_\_

Occupation: \_\_\_\_\_ No. of Hours you work per Week: \_\_\_\_\_

Source(s) of Taxable Income: \_\_\_\_\_

Source(s) of Non Taxable Income: (child support, welfare, social security, etc.): \_\_\_\_\_

Please explain any unusual circumstances or expenses that interfere with your ability to pay for your education:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you receive educational benefits or reimbursement from your employer? Yes  No  If yes, please list amount and details: \_\_\_\_\_

What other financial aid and scholarships have you applied for and received? Please list name, amount, and date applied:

_____	_____	\$ _____
Name of Aid/Scholarship	Date Applied	Amount
_____	_____	\$ _____
Name of Aid/Scholarship	Date Applied	Amount
_____	_____	\$ _____
Name of Aid/Scholarship	Date Applied	Amount

As a condition of applying for the LCCC University Partnership Empowerment Award (UPEA), I certify that I have truthfully completed all of the information required for receipt of this award. All information on this form is true and correct to the best of my knowledge. Falsification of any information may result in disqualification or cancellation of the UPEA. I also give permission to LCCC to release information about me to the LCCC Foundation Office and to the University Partner.

\_\_\_\_\_  
Signature Date

**Please complete the Essay Section on the reverse!**

**2009-2010 FALL AND SPRING APPLICATION DEADLINE IS May 31, 2009!**

**2009- 2010 University Partnership Empowerment award  
ESSAY SECTION**

Please answer these questions in depth.

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

*1. Provide a brief profile of yourself:*

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*2. What are your educational goals and what do you expect to accomplish by receiving this award?*

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*3. If you're a previous or current college student, how have you paid for your tuition and books (source of funds)?* \_\_\_\_\_

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*4. How do you plan to use the money if awarded? Be specific.*

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*5. How has or how will the University Partnership change your life?*

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