

**The Dorthiea Price Memorial Scholarship** was established to help adult learners overcome barriers to obtaining their GED. Scholarship funds may be used for GED testing fees, educational materials, transportation assistance, and other approved educational expenses.

*Please complete all sections of this application. Submission of an application does not guarantee an award.*

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## **APPLICANT INFORMATION**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

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Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Preferred Method of Contact:

Phone

Text

Email

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## **GED STATUS**

Are you currently enrolled in Charlotte Learning Center GED classes?

Yes

No

How long have you been attending classes?

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Have you previously taken any GED tests?

Yes

No

If yes, please explain:

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## **EDUCATIONAL GOALS**

Why do you want to earn your GED?

Employment Advancement

College or Trade School

Military Service

Personal Achievement

Other: \_\_\_\_\_

Briefly describe your goals after earning your GED:

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## **SCHOLARSHIP REQUEST**

What type of assistance are you requesting? (Check all that apply)

GED Testing Fees

Practice Tests

Educational Materials

Transportation Assistance

Other Educational Expense

Please describe your need:

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**Transportation Assistance (if requesting):**

- Approximate round-trip distance to class: \_\_\_\_\_ miles
- How often does transportation prevent you from attending class?
  - Rarely
  - Sometimes
  - Frequently

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**BARRIERS TO SUCCESS**

Please describe any challenges or obstacles that make it difficult for you to complete your GED:

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**COMMITMENT STATEMENT**

In your own words, explain why receiving this scholarship would help you continue working toward your GED:

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**APPLICANT CERTIFICATION**

I certify that the information provided on this application is true and accurate to the best of my knowledge. I understand that scholarship awards are based on demonstrated need, available funding, and participation in Charlotte Learning Center programs.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## **STAFF USE ONLY**

Date Received: \_\_\_\_\_

Reviewed By: \_\_\_\_\_

Eligible:

Yes

No

Award Approved:

Yes

No

Type of Assistance Awarded:

GED Testing Fees

Educational Materials

Transportation Assistance

Other

Amount Awarded: \$ \_\_\_\_\_

Notes:

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

Approval Signature:

\_\_\_\_\_

Date: \_\_\_\_\_