West Virginia Northern Community College 2025-2026 <u>Continuing Education</u> Scholarship Application Please print or type and answer *ALL* questions.



Name			Soc. Sec. N	O. XXX-XX
First	Middle	Last		Last 4 digits
Address			County	
No. and Stree				
City, State, Zip		Phone Number:		Date of Birth
E-mail		·		
High School:			Year of Graduation:	
Planned Course of Enrol	ment:			
Planned Course of Enroll	ment Start Date:			
Planned Campus of Atter	ndance (check one): Wh	neeling	Weirton	New Martinsville
Are you currently taking	classes at WVNCC as a	Degree Seeking Stud	lent? Yes	No
		A at studentaid.gov i	s highly recom	mended. Some WVNCC Foundation
CERTIFICATION: I	authorize the release	of all application m	aterials inclu	ding references, transcripts, and
financial need informa awarded a scholarship, academic transcript ma	tion to the members of this information may be released to the so	f the scholarship se be released to the reholarship sponsor(lection comm nedia or place s). I authorize	ittee. In the event that I am ed on WVNCC's website, and my the release of the information sisting with the awarding of
Signature			Date:	
TC 1	1 4 4 3373	ANICCO E: 1	A:1000	

If you have any questions, please contact WVNCC's Financial Aid Office or any of our Campus Student Service Centers using the information provided below.

Wheeling Campus: 304-233-5900 New Martinsville Campus: 304-455-4684 Weirton Campus: 304-723-2210

> www.wvncc.edu financialaidoffice@wvncc.edu

