

EXTERNAL Erwin Fry Foundation Scholarship Application Form

Name _____ Date _____

Address _____

(Street number, P.O. Box, etc.)

(City, State, Zip)

Email: _____

Telephone: _____

(Home/cell)

(Work)

Applicant's Student Identification Number

1. What is your state of legal residence? _____

2. If Arizona, when did you become a legal resident of this state? _____

3. Length of residence in Cochise

County? _____

Record of Education

| School Attended | Name & Address | Major Courses | Cumulative GPA | Date Graduated or GED Completed |
|-----------------------------|----------------|---------------|----------------|---------------------------------|
| High School/ Home School | | | | |
| College | | | | |
| Technical/ Vocational | | | | |

Name of the academic institution you plan to attend in 2019-2020: _____

Address: _____

(Street number)

(City, State, Zip)

Major: _____ Have you received a Fry Foundation Scholarship preciously? Yes No

If yes_School Year/Name of academic institution _____

2019-2020 Erwin Fry Foundation Scholarship Application (Cont)

Please complete the following (attach a separate sheet if needed):

Extra-Curricular activities in which you have participated (both school and non-school related)

The college/university that you plan to attend must determine your financial need.

Check the appropriate choice below:

___ **I have** filed the Free Application for Federal Student Aid (FAFSA) with Financial Aid.

___ **I have not** filed the FAFSA application with Financial Aid, and I understand that my Erwin Fry Foundation Scholarship application will not be considered until I have filed the FAFSA.

If you receive an Erwin Fry Foundation Scholarship your academic progress will be monitored by Cochise College. Do you understand this? Check one of the following: Yes No

I acknowledge that I have received a copy of the Cochise College Foundation Guidelines for the Erwin Fry Foundation Scholarship.

Applicant's Signature _____ Date _____

Please return or mail application to:

Financial Aid Office

ATTN: Erwin Fry Foundation Scholarship

Cochise College

901 N. Colombo

Sierra Vista, AZ 85635

Erwin Fry Foundation Scholarship Request for Financial Aid Form for Students Attending or Transferring to an Institution Other Than Cochise College

1. Cochise College’s Financial Aid Office must establish an applicant’s financial need before an application will be considered for an Erwin Fry Foundation Scholarship.
2. The scholarship award will be based upon financial need first. The student must maintain full-time student status at their college/university during each term in which they receive an Erwin Fry Foundation Scholarship, not to include credit hours obtained with a consortium agreement with another institution
3. Continuation of the Erwin Fry Foundation Scholarship will be based upon the student maintaining a GPA of 2.0 or better each term at their institution. Incompletes will not be counted.
4. If a student transfers to a new institution after submitting a signed Erwin Fry Foundation Scholarship agreement, the student must notify the Cochise College Financial Aid Office of this change. The new institution must then submit the student’s financial aid information to the Cochise College Financial Aid Office when requested by Cochise College. Scholarship funds will not be disbursed to the new institution until the Cochise College Financial Aid Office has received and processed the financial aid information from the student’s new institution. 5. If a student fails to file a FAFSA with the institution she/he is attending, the Erwin Fry Foundation Scholarship application will be voided by the Cochise College Financial Aid Office after notification from the student’s college/university.

Detach the Authorization Below and Return to Cochise College’s Financial Aid Office

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Authorization for Financial Aid Information to be Sent to Cochise College Your college/university must complete and return the eligibility form provided to them periodically by the Cochise College Financial Aid Office. It must be submitted to the following:

Financial Aid Office
 ATTENTION: Erwin Fry Foundation
 Scholarship Cochise College
 4190 West Highway 80
 Douglas, AZ 85607-6190

Federal law (FERPA) requires that you authorize the release of your financial and academic information. Please complete and sign the following authorization form giving your college/university permission to send your financial aid and academic enrollment information to the Cochise College Financial Aid Office. Submit this form to your College’s Financial Aid Office.

I authorize _____ to release to Cochise College
 (name of academic institution)

my financial aid, enrollment and academic information for use in determining my financial need. This information will be used only to determine my eligibility for the Erwin Fry Foundation Scholarship.

Applicant’s Signature _____ Date _____

Student Id for other Institution _____ SSN _____