

2024-2025 Golden LEAF Community College Scholarship Application



Instructions: Complete this application and return it to the college's Financial Aid Office or the office designated by the college. Eligible students must reside in a qualifying county as determined by the Golden LEAF Foundation

Personal Information:		
Full Name:	Student ID Number:	
Address:	City:	St: Zip:
Phone Number:	Email:	
NC County of residence:	How long have you lived in	n the county listed? Years or
Months? (To be eligible for an initial	al award, your permanent residence mut	be in a qualifying county determined by
the Golden LEAF Foundation)		
Educational Information:		
Community College you are atte	ending:	
Curriculum program you are enr	olled/enrolling in:	
WCF course/pathway you are e	nrolled/enrolling in:	
	_	6 hours. The list of eligible credentials is
available at https://nccareers.org/c	•, •	
Other Information:		
Have members of your i	mmediate family worked for or owne	ed a farming or agricultural related
business?yes _	no	
Have you or members o	f your immediate family been emplo	yed in traditional industries such as
furniture, textiles, or tob	oacco manufacturing? yes	_ no
Has anyone in your house	sehold lost their job in the past two y	ears? yesno
Has anyone in your house.	sehold transitioned from a full-time j	ob to a part-time job? yes no
Applicant Certification:		
I have read and understand the requ	uirements of this scholarship. I hereby d	eclare that the information provided on
this form is complete and correct to	o the best of my knowledge.	
Applicant Signature:		Date: