



LLCC Foundation Scholarship Application Packet 2009 ~ 2010



APPLICATION DEADLINES

February 2, 2009

5 p.m.

First-time and Continuing college students

May 1, 2009

5 p.m.

First-time and Continuing college students

- This application with all required documentation must be received in the LLCC Foundation, main campus, level one, Menard Hall, by 5 p.m. by the deadline date.
- Applications may be submitted to any LLCC Regional Education Center by the deadline date.
- Applications sent in the U.S. mail must be postmarked by the deadline date.

LLCC Foundation
P.O. Box 19256, 5250 Shepherd Road
Springfield, IL 62794-9256

- ***PLEASE NOTE: Late or incomplete applications will NOT be considered.***

COMPLETE APPLICATIONS

Submission of a complete and timely application packet is the sole responsibility of the applicant. Application packets that are incomplete, missing information, are not signed by the applicant or are missing required documentation will NOT be considered for review. An application is complete when the following have been submitted on or before the above deadline dates:

- Application (pages 1 - 7) and other documentation requested for specific scholarships, and
- Two recommendations (pages 10 and 11).

First-time college students must also submit:

- High School certification and official transcript (page 12) or copy of GED certificate.

Continuing college students must also submit:

- Unofficial LLCC transcript or official transcript from any other post-secondary institution.

Questions?

Lori A. Smith, LLCC Foundation Scholarship Program Coordinator
(217) 786-4502 or (toll free) 866-266-6582
Lori.Smith@LLCC.edu

RECOMMENDATIONS and TRANSCRIPTS

RECOMMENDATIONS: All applications must include two recommendations from non-family members.

We suggest recommendations come from individuals who have a professional relationship with the applicant, such as a teacher or employer, or from individuals who have first-hand knowledge of the applicant's characteristics. Recommendations should NOT be from family members. If recommendations are submitted separately from application, they must be received in the LLCC Foundation or postmarked by the appropriate application deadline. Recommendations submitted after the application deadline will not be accepted.

TRANSCRIPTS: All applications must include a transcript of grades.

Unofficial copies of GED certificates or LLCC transcripts are acceptable. High school transcripts (which must show a minimum of seven semesters) or those from other post-secondary institutions MUST be official copies. If transcripts are submitted separately from application, they must be received in the LLCC Foundation or postmarked by the appropriate application deadline. Transcripts submitted after the application deadline will not be accepted.

GENERAL GUIDELINES

The following guidelines apply to all LLCC Foundation scholarships and LLCC Board of Trustees' Honors Program scholarships unless the scholarship donor has requested otherwise.

1. LLCC students may hold only one LLCC Foundation scholarship or LLCC tuition waiver at a time.
2. Students receiving tuition waivers (athletic, senior, or LLCC employee) are not eligible for LLCC Foundation scholarships. Waiver recipients may use this application to apply to the LLCC Honors Program only. (See page 8)
3. Students need only submit one scholarship application per academic year and are considered for all available scholarships for which they are eligible.
4. Scholarship applications are kept on file through the end of the academic year.
5. Each semester, recipients must meet and maintain the scholarship criteria established by the donor.
6. Most scholarships have a stated grade point average (GPA) based on a 4.0 scale and/or a minimum number of LLCC credit hours that students must complete in each semester.
7. Awards are first applied to tuition and fees; some scholarships also provide for books and other related educational expenses.
8. Awards are used for fall and spring semesters.
9. Scholarships are not transferable to other schools.

SCHOLARSHIP SELECTION & NOTIFICATION

The LLCC Foundation Scholarship Selection Committee selects and awards scholarships. The committee includes representatives from LLCC faculty and staff, LLCC Foundation Board, and the LLCC Foundation Scholarship Program Coordinator. Selection meetings are held in April and July. **All applicants will be notified regarding their status of eligibility and awarding.**

LLCC is an equal opportunity educator and employer.

LLCC Foundation Scholarship Application

2009
2010

Please print or type in black ink.

Last Name

First Name

Middle Initial

Mailing Address

City, State, ZIP

County

Day Phone Number

Evening Phone Number

Email Address

Social Security Number

Date of Birth

Marital Status

Number of dependent children

Gender: female male

STUDENT STATUS (all students complete)

Please check one of the following:

- First-time college student** – I have not attended a post-secondary institution (college, university or trade school) since earning a high school diploma or equivalent.

Note: High school seniors are considered first-time college students for their first academic year at LLCC even if they...

1. graduated early from high school,
2. graduated early from high school and will take spring '09 or summer '09 classes; and/or
3. took LLCC classes while in high school (dual enrollment/dual credit).

- Continuing college student** - I have attended LLCC or another post-secondary institution since earning a high school diploma or equivalent.

CITIZENSHIP (all students complete)

Are you a U.S. citizen? YES NO

If no, have you been granted one of the following permanent resident statuses?

- Resident Alien Refugee / Asylum *(Please provide proof of residency status)*

Last Name

First Name

Middle Initial

RESIDENCY (all students complete)

Your residency may affect your eligibility for a Foundation Scholarship. Most scholarships require applicants reside in Lincoln Land Community College District #526. If you are uncertain about your residency, check the LLCC catalog, your property tax bill or voter's registration card for District #526. For questions about residency classification, please contact the LLCC Office of Admissions & Records at 217-786-2298, extension 5.

Are you a resident of LLCC District 526? YES NO

If your primary residence is not in the LLCC District 526, have you received a residency classification from LLCC's Admissions and Records?

YES — If yes, what is your classification?

Joint Agreement with another community college

Out-of-district

NO – If no, are you a dependent student who has at least one parent residing in LLCC District 526?

YES

NO

EMPLOYMENT (all students complete)

Are you currently employed?

YES – If yes, please give employer name _____

Date Hired _____ / _____ / _____ Hours per week _____

NO

EDUCATION (all students complete)

Name of high school (or home school) attended

Graduation (Month/Year)

GED program attended. *Must submit documentation with application.*

Received (Month/Year)

Excluding LLCC, list any schools attended, training received or military service since earning a high school diploma or equivalent.

Last Name

First Name

Middle Initial

LLCC ENROLLMENT INFORMATION (all students complete)

LLCC Student ID # (if applicable) _____

How many credit hours do you plan to take at LLCC each semester?

Fall 2009	Spring 2010
_____ 12 or more (<i>full-time</i>)	_____ 12 or more (<i>full-time</i>)
_____ 9 to 11 (<i>three-quarter time</i>)	_____ 9 to 11 (<i>three-quarter time</i>)
_____ 6 to 8 (<i>half-time</i>)	_____ 6 to 8 (<i>half-time</i>)
_____ 3 to 5 (<i>part-time</i>)	_____ 3 to 5 (<i>part-time</i>)

State your major as declaring/declared with LLCC Admissions. _____

When do you expect to complete your studies at LLCC? _____
(Month/Year)

SPECIFIC SCHOLARSHIP CRITERIA (all students complete)

Some LLCC Foundation scholarships have specific criteria required by the scholarship donor. In order to be considered for all available LLCC Foundation scholarships, answer the following statements which are true and submit additional information if required.

First-Time College Students ONLY

- I am affiliated with the Springfield Urban League. Provide proof of affiliation in a letter or recommendation from someone who works for the Springfield Urban League.
- I am a graduate of the Capital Area Career Center's Auto Technology Program.
- I am or will be a graduate of Hillsboro High School and plan to return to the Hillsboro area upon completion of my educational goals. Submit a separate one-page statement about your plans to return to the Hillsboro area.
- I plan to major in Art, Fine Art, Music, Speech or Theater. Submit a portfolio, cassette tape or video tape of your work.

Last Name

First Name

Middle Initial

First-Time College OR Continuing College Students

- I am ultimately seeking a Bachelor's Degree in the field of broadcasting.**
- I am a direct descendant (child or grandchild) of a current member of AARP Sangamon Chapter 195.**
*Submit a copy of the Sangamon Chapter 195 membership card. **National AARP card is not acceptable.***
Member's name: _____ Relationship: _____
- I am a father seeking educational improvement.** *Submit a separate statement describing your positive family values.*
- I am a legal resident of Christian County and will major in Education.**
 - I plan to become a classroom teacher.
 - I would consider transferring to the University of Michigan, School of Education.
- I am a Marine veteran or child, brother, sister or grandchild of a Marine veteran.**
Submit proof of veteran's service such as a copy of discharge papers.
Veteran's name: _____ Relationship: _____
- I live in Springfield; I am or will be a graduate from a Springfield public or private high school and I plan to major in Law Enforcement Administration.**
 - a) *One LLCC Foundation Scholarship Recommendation Form (p. 9) must be from an officer of the Springfield Police Department, **and***
 - b) *The second LLCC Foundation Scholarship Recommendation Form (p. 9) must be from from a school administrator or faculty.*
- I take voice or piano training.**
- I intend to pursue Music Education as a vocation.**
- I am the first person in my immediate family to attend college.**
- I am considered a person with special needs.** *Submit proof that you have registered with LLCC's Special Needs Office.*
- I am a firefighter with _____ Fire Department.**
 - I am paid
 - I am a volunteer
- I am female and have experienced a break in my education.** *Please note month and year of last high school or college course taken.* _____

Last Name

First Name

Middle Initial

I am a descendant of a current member of LLCC's Academy of Lifelong Learning (ALL).

Member's name: _____ Relationship _____

I live with a grandparent.

I have been accepted to the LLCC Associate Degree Nursing (ADN) Program.

First-Time College Students stop here. Go to "Personal Statement." (p. 6)

Continuing College Students . . . continue with the following questions.

I am a U.S. veteran.

a) Submit proof of service such as a copy of discharge papers. If active in the National Guard or Reserves, provide a letter from your unit verifying honorable service.

I am a member of the LLCC Veterans Club.

I am majoring in Architecture and have completed 24 post-secondary credit hours. Submit a sample of your work.

I plan to attend classes at the LLCC Western Region Education Center in Jacksonville or Beardstown.

I am an active participant in the WREC Student Union.

I am majoring in a health-care program that provides direct medical care to individuals, and I am committed in my intent to practice in Illinois or a border state where Illinoisans go for primary health care.

I am a second-year foreign language student who plans to use foreign language in my career. Submit a separate statement explaining how you will incorporate the language into your daily work.

I live in Sangamon County and am a voting member or dependent of a voting member of the Sangamon County Farm Bureau. Submit a photocopy of the membership card.

Member's name: _____

I am (please check all that apply) an LLCC Student Government Association member

an officer of an LLCC club.

List name of club and office held: _____

Go to "Personal Statement" on next page.

Last Name

First Name

Middle Initial

FINANCIAL NEED

Explain your financial need for a scholarship or any special circumstances affecting your family income.

All students must acknowledge the following . . .

1. **I understand** that all information presented on this scholarship application is true and correct to the best of my knowledge. I understand that this information is subject to verification.
2. **I give my consent** to Lincoln Land Community College or LLCC Foundation personnel, scholarship donors, and Scholarship Selection Committee members access to review all of my application materials in accordance with Federal Right to Privacy Act (FERPA) guidelines. This includes copies of my recommendations, high school or LLCC transcripts and financial aid information on file at LLCC.
3. **I understand** that if I am awarded a scholarship, I agree to allow my name and relevant information to be released.

Signature of Applicant

Date

(This form must be signed by the applicant. Unsigned applications will be not considered.)

Mailing address

Questions?

LLCC Foundation
PO Box 19256, 5250 Shepherd Road
Level One, Menard Hall
Springfield, IL 62794-9256

Lori A. Smith
LLCC Foundation Scholarship Program Coordinator
(217) 786-4502 or (toll free) 866-266-6582
Lori.Smith@LLCC.edu

LLCC Honors Program

The LLCC Honors Program provides unique educational experiences for academically superior students in order to challenge, educate and reward them at a level consistent with their intellectual needs and abilities. The Honors Program emphasizes critical thinking, student interaction, in-depth reading and discussion, smaller classes, special study facilities and contact with other high-ability students.

What does the LLCC Honors Program offer?

LLCC Honors Program students enjoy these benefits:

- **Individualized advising and priority registration.** Honors Program students receive advice about classes from the dedicated academic advisor for the Honors Program. Early registration is available.
- **Special Honors classes with smaller enrollments.** Honors classes generally have a maximum number of 15 students enrolled in the course.
- **Individualized study.** Students may convert a regularly scheduled section of a course into an Honors course by contracting with the instructor to broaden the scope of the course with specially designed projects or activities.
- **Academic mentors.** Mentors are LLCC faculty members or administrators. Students have a person to turn to with questions regarding their education.
- **Participation in decision making.** Honors Program students have a voice in the planning and direction of the Honors Program through membership in the Honors Program Committee.
- **Honors Study Lounge.** A study lounge for the exclusive use of Honors Program students is equipped with computers and Internet access. The Study Lounge serves as a gathering place for Honors Program students to study, relax and socialize.
- **Transcript Recognition.** Each Honors course is distinguished with a “+” sign on the transcript. Transcripts of students who successfully complete the Honors Program are inscribed with the phrase “Honors Program Graduate.”

Are scholarships available exclusively to Honors Program students?

LLCC Trustees’ Honors Program Scholarships are available to first-time college students who are accepted into the Honors Program. Honors Scholarships are good for up to 60 credit hours of tuition. Applicants who are accepted into the Honors Program but do not receive the LLCC Trustees’ Honors Program Scholarship **will still be eligible for other LLCC Foundation scholarships.** A scholarship recipient may hold only one LLCC scholarship or waiver at a time.

Last Name

First Name

Middle Initial

What are the requirements of the Honors Program?

To successfully complete the program, Honors Program students must:

- Maintain a 3.50 grade point average;
- Complete at least 15 credit hours of honors-designated courses, including SOC 112 (Leadership Development); and
- Take at least one honors-designated course each academic year.

Who is eligible to apply to the LLCC Honors Program?

1. **First time college students:** Students who **have not attended a post-secondary institution** (college, university or trade school) since earning a high school diploma or equivalent **and have a minimum composite score of 25 on their ACT.**
2. **Continuing college students:** Students who **have attended LLCC or another post-secondary institution** and have completed a minimum of 12 credit hours, and are currently **maintaining a cumulative LLCC grade point average of 3.50 or higher.**

How do I apply to the Honors Program?

Applicants must read and complete all items and sign their name at the bottom of this section.

1. I meet the Honors Program eligibility requirements (*listed above*).
2. I have completed the LLCC Foundation Scholarship Application packet, including the Personal Statement (*page 6*).
3. I have written a 300-500 word essay describing my personal and career goals and explaining in what way participation in the Honors Program will help me reach those goals. (*Put your name on the essay page and title it "Honors Essay."*)
4. I have had a high school or college instructor complete the two required recommendation forms (*pages 10 and 11*).
5. (*First-time freshmen only*) I have had my high school official complete the certification form (*page 12*).
6. Applicants with more than 35 credit hours must include a proposed program of study with their application, demonstrating how they will complete all the requirements of the Honors Program.
7. **Have you been awarded an LLCC Tuition Waiver?** Yes No
If yes, list the name or type of waiver: _____

Signature | _____

Date | _____

Where can I get information about the LLCC Honors Program?

David Laubersheimer, Honors Program Director
217-786-2240 or 800-727-4161, extension 62240
David.Laubersheimer@LLCC.edu

LLCC Foundation Scholarship Recommendation

**2009
2010**

APPLICANT - This section to be completed by the applicant.

Applicant's Last Name *Applicant's First Name* *Middle Initial*

Mailing Address *City, State, ZIP*

Choose one of the following application deadlines:

February 2, 2009 May 1, 2009

(Applications from First-time and Continuing College Students are accepted at both application deadlines.)

Optional

I hereby waive my rights of access to this confidential recommendation as provided in the Family Educational Rights and Privacy Act of 1974. By signing this statement you will not be allowed to have access to this form once it is submitted by the person supplying the recommendation.

Signature of Applicant *Date*

REFERENCE - This section to be completed by the reference.

Please rate the applicant on the following characteristics:

	Excellent	Above Average	Average	Below Average	Poor	Unknown
Commitment to the academic program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Genuine interest in learning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Integrity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leadership	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Commitment to excellence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Likelihood of academic success	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Commitment to community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please share your thoughts on the applicant's potential for success: *(Use separate sheet, if necessary)*

Signature *Date*

Printed name *Position*

Institution

Please fax form to: (217) 786-2870. Or mail to: LLCC Foundation, 5250 Shepherd Road, P.O. Box 19256, Springfield, Illinois, 62794-9256 by the application deadline checked above.

LLCC Foundation Scholarship Recommendation

**2009
2010**

APPLICANT - This section to be completed by the applicant.

Applicant's Last Name *Applicant's First Name* *Middle Initial*

Mailing Address *City, State, ZIP*

Choose one of the following application deadlines:

February 2, 2009 May 1, 2009

(Applications from First-time and Continuing College Students are accepted at both application deadlines.)

Optional

I hereby waive my rights of access to this confidential recommendation as provided in the Family Educational Rights and Privacy Act of 1974. By signing this statement you will not be allowed to have access to this form once it is submitted by the person supplying the recommendation.

Signature of Applicant *Date*

REFERENCE - This section to be completed by the reference.

Please rate the applicant on the following characteristics:

	Excellent	Above Average	Average	Below Average	Poor	Unknown
Commitment to the academic program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Genuine interest in learning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Integrity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leadership	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Commitment to excellence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Likelihood of academic success	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Commitment to community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please share your thoughts on the applicant's potential for success: *(Use separate sheet, if necessary)*

Signature *Date*

Printed name *Position*

Institution

Please fax form to: (217) 786-2870. Or mail to: LLCC Foundation, 5250 Shepherd Road, P.O. Box 19256, Springfield, Illinois, 62794-9256 by the application deadline checked above.

LLCC Foundation Scholarship High School Certification

**2009
2010**

This form is required for all first-time college students.

Once you have completed the top section, give this form to your high school official to complete and submit. If you are a GED student, please submit a copy of your GED certificate and final test scores.

APPLICANT - This section to be completed by the applicant.

Applicant's Last Name _____
Applicant's First Name _____
Middle Initial

Mailing Address _____
City, State, ZIP

Choose one of the following application deadlines:

February 2, 2009 May 1, 2009

HIGH SCHOOL OFFICIAL - This section to be completed by the high school official.

Please complete and send with high school transcript to address below.

NOTE: If your school does not post 7th semester grades until after the February 1 deadline, please contact the LLCC Foundation Scholarship Coordinator as soon as possible (217-786-4502) to let us know when transcripts will be available. Your students will not be penalized and will receive the same consideration for LLCC Foundation scholarships as applicants from other high schools.

1. Cumulative high school grade point average of _____ after completing
(*please check one*) _____ seven semesters or _____ eight semesters is based on the following:

Check one: A = to 4.0 A = to 5.0 **Check one:** weighted unweighted

2. Class Rank _____ out of _____

3. ACT Scores:

English _____

Math _____

Reading _____

Science _____

Composite _____

4. Please attach an official copy of the student's high school transcript (*through a minimum of seven semesters*).

Signature of high school official _____
H.S. official's phone number _____
Date

Please mail to: LLCC Foundation, 5250 Shepherd Road, P.O. Box 19256, Springfield, Illinois, 62794-9256 by the application deadline checked above.