OFTC FOUNDATION GENERAL EDUCATION SCHOLARSHIP
Offered by the OFTC Foundation at Oconee Fall Line Technical College

The OFTC Foundation General Education Scholarship will be awarded to a student enrolled or planning to enroll full-time at Oconee Fall Line Technical College (OFTC). Applicants for this scholarship must be residents of Bleckley, Dodge, Laurens, Telfair, Wheeler, or Wilkinson County. The Scholarship was established by the OFTC Foundation.

The OFTC Foundation will award 24 scholarships annually to students currently enrolled or planning to enroll full-time (12 credit hours*) in any diploma or degree program. Applicants for this scholarship must demonstrate a commitment to their field of study, academic excellence, outstanding moral character and a determination to succeed in life. The scholarship is need and merit based.

The OFTC Foundation General Education Scholarship packets will be disseminated during the second week of Spring Semester. Award amounts will be $500. The scholarship selection committee will make an award based on the applicant’s need and merit. The scholarship awarded to each student will be split between the next Fall and Spring Semesters and will be paid by a check from the OFTC Foundation to the student after the registrar verifies the recipient’s successful completion at the end of each semester.

A completed application may be submitted directly to the Foundation Office by mail, email scan, or in person. Applications are due by mid-term of the semester, as published in the OFTC official catalog.

Mail: OFTC Foundation, Inc., Oconee Fall Line Technical College, 560 Pinehill Road, Dublin, GA 31021
Email: oftcfoundation@oftc.edu
Office: OFTC Foundation, Louie Livingston Hall, B12 (2nd floor), South Campus, Dublin

*For purposes of this scholarship, students enrolling in 7 or more credit hours in Automotive Technology, Diesel Equipment Technology, Industrial Systems Technology, or Machine Tool Technology are considered full-time students.
APPLICATION

PERSONAL INFORMATION

Name______________________________________________ Date ______________________

Gender __M  __F  Marital Status __Married  __Single  Date of Birth ______________________

Student Identification #________________________Cumulative GPA ______________

Phone Home_________________ Work _________________ Cell ______________________

E-mail address_______________________________________________________________

Home address ______________________________________________________________

Mailing address (if different from home) ________________________________________

Program of Study___________________ Semester enrolled or planning to enroll_______

DEPENDENTS

Do you have children or other dependents?  __ Yes  __ No
If so, please list their names, ages, and relationship to you. ______________________________

________________________________________________________________________

SOURCES OF SUPPORT

Please list everyone who contributes to your financial support.______________________

__________________________________________

If you are being supported by your parents, please list names and ages of all siblings.____

________________________________________________________________________

Have you applied for any other scholarships?  __ Yes  __ No
If yes, please list:__________________________________________________________

Have you been notified by any other scholarship source that you will receive a scholarship for
next year?  __ Yes  __ No

If yes, give source and amount.  ______________________________________________________

Briefly describe your financial need (may use additional pages).________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please list three references (instructors, clergy, former employers, etc) and give each reference
the attached personal reference form to complete and return to: Executive Director, OFTC
Foundation South, 560 Pinehill Road, Dublin, Georgia 31021.
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please briefly explain when you first became interested in this field, and if you have
circumstances or individuals that influenced your decision to go into technical education (may
use additional pages)
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

______________________________________________________

Applicant’s Signature                              Date
OFTC General Education Scholarship
PERSONAL REFERENCE

Name of applicant_________________________________________________________

1. How long have you known the applicant and in what capacity?________________________________________________

2. What do you consider the strengths or weaknesses of the applicant?_____________________________________________________________________
............................................................................................................................................

3. Do you place full confidence in this applicant’s integrity? If not, please explain._____________________________________________
............................................................................................................................................

4. Does the applicant possess any traits that might be prohibitive to his/her chosen career field?_____________________________________________________________________
............................................................................................................................................

5. Please indicate your endorsement of the applicant as a suitable candidate for this scholarship:
   □ Endorse with enthusiasm
   □ Endorse
   □ Do not endorse

6. Please provide any additional comments________________________________________________________
............................................................................................................................................
............................................................................................................................................

_________________________ __________________________
Printed Name Signature

_________________________ __________________________
Date Telephone #

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OFTC General Education Scholarship

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   _______________________________________________________________________

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   [ ] Do not endorse

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   _______________________________________________________________________
   _______________________________________________________________________
   _______________________________________________________________________

   ________________________________   ________________________________
   Printed Name                     Signature

   ________________________________   ________________________________
   Date                             Telephone #

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OFTC General Education Scholarship

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_____________________________________________________________________

__________

Printed Name                                           Signature

_________________________________________                    __________________________

Date                                                Telephone #

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