Please type or write legibly.

This Scholarship Application is for Continuing Education classes only.

Name:	**SSN:** **Date of Birth:**
Street Address:	**Phone #** **Alternate Phone#**
City/State/Zip:	**Email:**
Class	**Class Cost**
Are you employed?	**What is your occupation?**

Statement of Need:

What are your career goals and how can HGTC help you achieve them?

I hereby apply for the Horry Georgetown Technical College Continuing Education Scholarship. The above information is true to the best of my knowledge.

_____   _____
Date   Signature

*Scholarship applications must be submitted with proof of ACT WorkKeys assessments or WINS assessments in Applied Mathematics, Locating Information, and Reading for Information with scores of 3 (Bronze) or higher. Free assessments may be scheduled with our testing center by calling 843-349-5248 or https://www.hgtc.edu/admissions/testing_center/win.html.

You must be at least 18 years of age and a South Carolina resident to apply for this scholarship.

To be completed by Program Coordinator	
Scholarship Amount	Approval