2024-2025 APPLICATION

Administered by the North Carolina Coin Operators Association.



NCCOA Scholarship Fund

Please PRINT or TYPE all entries. Attach additional sheets if more space is needed.

GENERAL I	NFORMATIO	N		and the second s	
LAST NAME		f	RST NAME	MIDDLE_	DATE
STREET ADDRESS	AND THE RESIDENCE AND ADDRESS OF THE PARTY O		CITY	STATE	ZIP
PHONE			E-MAIL		
1. Are you currently wor	king in the industry?*	□ YES □ NO	2. Do you plan	to work in the industry upon graduation	?
3. Briefly, explain your r	easons for applying for t	his scholarship, why you believe it is	mportant and why it should be awarde	ed to you:	
	P1111111111111111111111111111111111111				
1					
4. How did you find out	about this scholarship?	☐ FRIEND/FAMILY ☐ GUIDAN	CE COUNSELOR INTERNET SEARCH	H 🗀 EMPLOYER 🗀 PAST RECIPIEI	NT OF SCHOLARSHIP
*					
EDUCATION					
l presently attend:	☐ HIGH SCHOOL	COMMUNITY COLLEGE	☐ 4 YEAR COLLEGE/UNIVERSITY	GRADUATE SCHOOL	☐ VOCATIONAL SCHOOL
Name of school			City	State	Zip
Grade Point Average See requirements below for			age must be given in U.S. standard format ((4.0). A copy of your most recent report card	must accompany your application (if High School).
Next Fall, I will be a:	☐ FRESHMAN	□ SOPHOMORE □	JUNIOR 🗀 SENIOR	☐ GRADUATE STUDENT	
If in High School, my Colle	ege will be:			Planned Majo	or
					5.5
If in College, my Major is:					

TRANSCRIPT REQUIREMENTS FOR COLLEGE STUDENTS

Official Paper Transcripts:

- · Can be retrieved through your school's guidance office
- · Are the original document, NOT a photocopy or printout

Official Electronic "e-Transcripts":

- We accept electronic transcripts as long as they are e-mailed directly from your school as a secure PDF
- Please send to recipient name: Jeff Douglas and email to NCCOA910@gmail.com
- It is NOT acceptable to mail NCCOA a printed copy of an e-Transcript
- Please make a note on this application or contact NCCOA to let us know to expect an e-mail from your school

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EMPLOYMENT HISTORY		
List your last two employers beginning with the most recent:		
EMPLOYER	POSITION/DUTIES	DATES
EMPLOYER	POSITION/DUTIES	DATES
EMPLOYER	POSITION/DUTIES	DATES
ACTIVITIES		
List your current community or extracurricular activities:	-,	
List any academic honors you have received:		
List any office or other industry leadership positions you have held:		
Estimate the total cost of your tuition and expenses for one school year. What percentage of costs will be covered by: Parents/Family?	INCOME & EXPENSES FOR ONE SCHOOL Y \$ % Other Scholarships/Grants? % Loans (for which you are personally	
REQUIRED SIGNATURES		
Number of dependent children currently attending college, including	ed by your parents/guardians as a tax deduction, THEY MUST complete and	I sign the section below:
B. You agree to furnish the NCCOA Education Foundation point making this application for the NCCOA Scholarship F	roof of course completion and grade point average. iund I certify that, to the best of my knowledge, the information contained in this	application is complete and accurate.
In making this application for the NCCOA Scholarship F Signature of Applicant	rund I certify that, to the best of my knowledge, the information contained in this a Date Date applicant is applying for an NCCOA Scholarship and we support this effort. (Yo	
In making this application for the NCCOA Scholarship F Signature of Applicant	tund I certify that, to the best of my knowledge, the information contained in this applicant is applying for an NCCOA Scholarship and we support this effort. (You the Foundation Board.)	
In making this application for the NCCOA Scholarship F Signature of Applicant	tund I certify that, to the best of my knowledge, the information contained in this applicant is applying for an NCCOA Scholarship and we support this effort. (You the Foundation Board.)	ur company's membership must be in good standing at tim
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Important: Read this form completely! Any form not fully completed may be disqualified for scholarship consideration. Applications must be received no later than May 31st, 2024. NO EXCEPTIONS!

Scholarship checks will be awarded by July 1 for the fall semester.

Questions? Call Jeff at 336-884-5714.

Applications with required documents should be mailed or emailed to NCCOA Schlorship Fund 2205 Gaither Ct. Archdale, NC 27263 or email nccoa910@gmail.com