

RASMUSSEN SCHOLARSHIP AWARD PROGRAM

APPLICATION

Student Contact Information

Name			Date of Birth	
Parent's Name (if app	olying for a child)			
Address			City	State Zip
Home Phone	Work Phone	Cell Phone_	E	-mail
Financial Informa	ation			
Which level best describes your household's gross income?			Provide one of the following forms of proof of financial status:	
Less than \$20,000\$40,000 - \$49,999			Copy of signed cover page of most recent tax return	
\$20,000 - \$	\$29,999\$	50,000 - \$59,999	Or	
\$30,000 - \$39,999\$60,000 and above		60,000 and above	Copies of last 2 pay stubs	
Number of depende	ents			
(Any additional financ	ial circumstances to be consi	dered should be address	sed in the brief essay	you submit along with this application.)
<u>Course Information</u> – Please indicate which course you wish to take. After your scholarship application has been processed and approved, you will be given a code to register at the discounted level.				
Course Name		Level	Loc	eation
Additional Inform	nation Required. Pleas	se provide the follow	ving along with th	nis application form.
1. (a) Resume, CV, or Personal History or (b) letter of support from a teacher (if applying for a child).				
2. List of two (2) references with contact telephone numbers.				
3.	Brief essay (between 25 a) Why you would like b) Any additional finan	to take a particular co	ourse at the Tenness	see Language Center, and sidered.
	mation submitted is accura s materials (textbooks and	_	_	ssen Scholarship Award Program, emaining tuition.
Signature			Date	
				gistration deadline for consideration: One hin one week of the deadline. Thank you.

Tennessee Language Center Rasmussen Scholarship Award Program 220 French Landing, Suite 1-B Nashville, TN 37243