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Office use only Code: WDSAPP / FA WD SEQUENCE AP

Workforce Development & Continuing Education 2025-2026 Sequence Scholarship Application

INSTRUCTIONS:

Please complete all sections of this form before printing it for submission.

<u>Incomplete applications will NOT be reviewed and all academic information will be verified.</u>

Please note: All official correspondence from the Office of Student Financial Aid (OSFA) will be sent to your

| Montgomery College e-mail address. | | | | | |
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| SECTION A: STUDENT INFORMATION | | | | | |
| Last Name: | First Name: | | | | |
| MC ID#: | Date of Birth: | | | | |
| Street Address: | | | | | |
| City: | State: | Zip Code: | | | |
| Preferred Phone #: | Alternate Phone #: | | | | |
| Are you a Veteran or Military Dependent? | Are you an employee | of Montgomery College? | | | |
| Yes: No: | Yes: | No: | | | |
| Please write your MC email address: | | | | | |
| SECTION B: Student Eligibility | | | | | |
| B.1 Are you a current Maryland resident? (check): | Yes | No | | | |
| B2. If you are not a current resident of Maryland, are you the graduate of a Maryland high school?(check): If yes, submit an official high school transcript with this application. YES NO | | | | | |
| B3. Are you an active duty member of the U.S. Military stationed, residing, or domiciled in Maryland?(check): YES NO If yes, submit a copy of your active duty orders or DD214. | | | | | |
| SECTION C: Sequence Scholarship Application | ion Status at Othe | College(s) | | | |
| Maryland requires that students may receive no more that workforce development sequence programs. | n \$2,000 annually in an | award year, for no more than two | | | |
| C1. Have you applied for a Maryland Workforce Developme Maryland Community college? | • | | | | |
| C2. If your answer in 3a was "Yes", please check the curre | | | | | |
| C3. If the answer to 3a was "Yes", please identify the collection | ge(s) to which you appli | ed for funding: | | | |
| College(s): Note: If you exceed the allowed funding amount or numb financially responsible for all tuition, fees, and associated | | | | | |
| C4. Have you completed the 2025-26 FAFSA? FAFSA. YES | NO If you answ | vered "NO", please complete the 2025-26 | | | |



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| SECTION D: Workforce Development Sequence Selection | |
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| Please indicate below the eligible workforce development sequence/program for which you wish to apply: | |
| Please specify your term of enrollment by checking the appropriate semester: Fall 2025 Spring 202 | 26 |
| Some programs require application and acceptance into the program in order for you to qualify for the Sequence Scholarship. Check the list on the website for details. Students may apply for up to two sequences, with a maximum \$2,000 total award for the award year. Please submit for one program at a time. Do not submit a second application until your first application is awarded. | |
| SECTION E: Drug-Free Pledge | |
| I agree, as a condition of receiving the Maryland Higher Education Commission Scholarship, I pledge to remain drug free for the full term of the award. Unlawful use of drugs and alcohol may endanger my enrollment in a Maryland college, as well as my Maryland Financial aid award. | |
| Student Signature:Date: | |
| SECTION F: Sequence Guidelines | |
| Students must have a valid social security number and meet at least one of the Maryland residency requirements listed under section C above. MC reserves the right to adjust or cancel your scholarship at any time if it is determined that you do not meet the qualifications. Scholarship recipients will be notified by college email. Scholarship awards must be used in the current award year. Scholarship funds can only be used to pay for tuition, fees, and associated costs of attendance (books, equipment) for classes in eligible course series. Students should not expect refunds of unused grant amounts. Scholarship funds not used within three months of being awarded may be canceled and you will have to reapply. Students must keep the college informed of any relevant name, address and phone number changes that will affect our ability to contact you. All scholarships are managed and awarded in accordance to the Maryland Higher Education Commission's prescribed guidelines and Montgomery College policy. Submit completed form to the Office of Student Financial Aid at the address listed below. SECTION G: Signature and Acknowledgement By signing this application, I certify that all of the information provided in the application is true to the best of my knowledge. I understand that Montgomery College reserves the right to adjust or cancel any scholarship awards based on my failure to comply with the guidelines as listed, and I will be financially responsible for any payments accrued as a result of any adjustments. | |
| Student Signature Date Please Mail to: The Office of Student Financial aid Germantown Campus, 20200 Observation Drive, SA 110, Germantown, MD 20876 | |