



Running Start Scholarship Application



(Students are eligible for one scholarship per semester.)

SECTION A—TO BE COMPLETED BY STUDENT (please print)

Student Name _____

Complete Mailing Address _____

High School or CTE Where Course is Being Offered _____

CCSNH Course Name _____

CCSNH Partnering College for this course White Mountains Community College

AGREEMENT & CERTIFICATION:

If I am awarded a Project Running Start scholarship, I agree to:

- Send a thank you letter to Governor Lynch in care of CCSNH System Office at 26 College Drive, Concord, NH 03301
- Allow excerpts from my letter to be used for Running Start promotional materials

I accept the above terms and certify that the information I have provided is true and complete to the best of my knowledge.

Student Signature _____ Date _____

SECTION B—TO BE COMPLETED BY HIGH SCHOOL STAFF MEMBER

The Running Start Scholarship Program is designed to assist students who would not be able to take a course in the Running Start Program without this financial assistance. Scholarship applicants must be economically disadvantaged and have a clear financial need (examples include: eligible for the federal free/reduced lunch program, currently receiving other forms of financial assistance, or experiencing other economic hardship, etc.).

I verify that the student qualifies based on the above criteria (one of the following must sign off)

- Teacher
 Counselor/Nurse
 Administrator

Signature _____ Date _____

Student: Staple the completed application to the course registration form.