



# Bright Start Scholarship

Yuma and La Paz Counties High School Students

## Eligibility

Student must:

- be enrolled as a student with AWC and register for a dual credit or early college class at their high school.
- need financial assistance in order to take the course.
- be currently enrolled full-time in a high school in Yuma or La Paz county.
- use scholarship for eligible to tuition costs.
- complete cover page and essay before deadline
- respond to the essay prompt in ONE – TWO pages

## Prompt

*Looking at your past, present and future, how will this scholarship help you attain your personal goals? Please also discuss why starting your college education early is important to you and your family.*

Please turn in your TYPED essay to your Counselor @ your high school.

Essay will need to be turned in to the counselor at least **one week before registration due date.**

Scholarship can be used for only **one** class per student. If required, books and course fees will not be included within the scholarship.

\*Please attach your 1-2 page essay to coversheet and turn in to your CTE/Head Counselor at your high school or email it to Tiffany Tipton-Pavey at [tiffany.tipton-pavey@azwestern.edu](mailto:tiffany.tipton-pavey@azwestern.edu). You will be notified in 5-10 business days if you **receive** the scholarship.



# Bright Start Scholarship Opportunities

## Yuma and La Paz County High School Student Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_

AWC ID#: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Phone Number: \_\_\_\_\_

High School: \_\_\_\_\_

AWC Class: \_\_\_\_\_

High School ID#: \_\_\_\_\_

Semester: \_\_\_\_\_

How would you like us to contact you (please check one)?

How many live in your household (please circle one)?

Mailing Address       Email Address

1    2    3    4    5    6    Other: \_\_\_\_\_

What is your household income (please check one)?

0-10K     10-20k     20-30k     30-40k     40-50k     50-60k     60-70k     <70k

Requested AWC contribution: \_\_\_\_\_

Personal Contribution: \_\_\_\_\_

**I understand that completion of this scholarship application does not guarantee any award of funds. As the parent, student, and/or legal guardian, I further understand that if sponsored billing does not cover any or all charges, I will be held responsible for any balance on the student's account. Applicants, who are awarded the scholarship, will be accepted based on financial need and the completion of entire scholarship application. Applications are due ONE week before registration. PLEASE SEE ESSAY PROMPT FOR SUBMISSION DEADLINE.**

Parent/Guardian Signature: \_\_\_\_\_

Student Signature: \_\_\_\_\_

THIS BOX TO BE FILLED IN BY COLLEGE OFFICIAL

Date received: \_\_\_\_\_ Counselor's Approval: \_\_\_\_\_ Processed Date: \_\_\_\_\_

Approved  Denied  Amount: \_\_\_\_\_ Contacted Date: \_\_\_\_\_

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