Kenneth C. and Patricia Hamister
Military Veterans and Family Members Scholarship
Spring Semester 2021

Lorain County Community College is proud to announce the availability of the Kenneth C. and Patricia Hamister Military Veterans and Family Members Scholarship. This award is intended to support Lorain County Community College or LCCC University Partnership students who are U.S. military veterans (honorably discharged) or their immediate family members (children, grandchildren, siblings, spouses, parents), and who meet all requirements of Lorain County Community College and/or the University Partnership program. To be considered for this scholarship, applicant must be enrolled for Spring Semester classes in a program leading to a degree or certificate by the application due date.

University Partnership Students: You must attach your most recent transcripts and proof of enrollment in the UP Institution for the semester of the scholarship. LCCC students’ status can be accessed by LCCC’s Financial Services; therefore, they are exempt of having to show proof of enrollment and transcripts.

To apply for this award, complete the application by January 6, 2021

Return your completed application to:
FINANCIAL SERVICES CENTER, LC146
LORAIN COUNTY COMMUNITY COLLEGE
1005 N ABBE ROAD, ELYRIA, OHIO 44035

Questions: Please call 440-365-5222 or 1-800-995-5222

Please complete the following:

First Name  Middle Initial  Last Name  LCCC Student Number or UP School

Home Address (Street, Apartment Number)  City, State Zip

Home Phone Number  E-mail address (if available)

Number of College Credits Earned:  What is your major?

Provide a brief profile of yourself and explain how you or a family member served in the US Military. You may attach an extra page if necessary:
List community service activities, special recognition or awards you've received.

How are you funding your college education? Please reference other scholarships or aid you are receiving.

I certify that I have truthfully completed all of the information required for receipt of this award. All information on this form is true and correct to the best of my knowledge. I give permission to LCCC to release information about my financial aid and academic record to the LCCC Foundation Office, Scholarship Donor and the Scholarship Selection Committee. In addition, I understand that if I am selected as a recipient of this award, I may be asked to participate in recognition or appreciation activities of the LCCC Foundation to help ensure continued support of the LCCC Foundation Scholarship Program.

Signature  

Date

Scholarship Sponsored by: This scholarship/award is made possible through the generosity of donors to the LCCC Foundation Scholarship Program. The LCCC Foundation supports Lorain County Community College by making possible scholarships and other program and technology enhancements that otherwise would not be possible. Individuals, businesses and organizations give generously to ensure scholarships are available to help needing and deserving students receive a college education at LCCC or its University Partnership. Their support is greatly appreciated.