



# PROJECT SKILLING UP STUDENT APPLICATION FORM

## APPLICANT INFORMATION

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MI: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME: (\_\_\_\_) \_\_\_\_\_ BUSINESS: (\_\_\_\_) \_\_\_\_\_ EXT: \_\_\_\_\_ CELL: (\_\_\_\_) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

GENDER:  Female  Male

### RACE:

- American/Alaska native
- Asian
- Black/African-American
- Hawaiian/Pacific Islander
- Hispanic/Latino
- White

### EMPLOYMENT STATUS:

- Full time (40 or more hours/week)
- Part time (39 or fewer hours/week)
- Unemployed

*Check all that apply.*

## INDICATE HOW YOUR JOB, FAMILY, AND/OR COMMUNITY HAVE BEEN ADVERSELY AFFECTED BY THE DECLINE OF THE TOBACCO INDUSTRY.

- Tobacco-related Plant Closing/Layoff
- Farming-related
- Other: \_\_\_\_\_

## STUDENT IMPACT STATEMENT

Please write at least 150 words about how you or your family have been impacted by the downturn in tobacco or farming in NC, and how this scholarship would impact you. How has the downturn in the Tobacco Industry or farming affected you or your family? Please be specific and give details on who was involved in the industry and how it has directly affected your family. Please print or type your statement on a separate sheet of paper and attach your final statement to this form. APPLICATIONS WILL NOT BE ACCEPTED WITHOUT THIS STATEMENT.

## APPLICATION TERMS AND AGREEMENT

As a condition of receiving financial assistance from Project Skilling Up, participants must submit a short statement at the completion of the program describing how the program has impacted their training and/or employment goals. Will you comply with this condition?  Yes  No

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

## PHOTOGRAPHY RELEASE / AUTHORIZATION

### AS PER THE INFORMATION SPECIFIED ON THIS FORM:

*I hereby consent that all photographs taken of me and stories shared by me may be used by Durham Technical Community College for the purpose of illustration, advertising, college web information/ promotion, or publication in any manner promoting Project Skilling Up.*  Yes  No

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_