Blue Cross Blue Shield Foundation
Firefighter <u>Scholarship to High School Students</u> Application

Please confirm if your college is an eligible college and if it is offering this option for the term you are interested in. Return the completed application form to the college Financial Aid Office by the deadline specified by the college.

Scholarship Award: Up to $1,000 per term (must reapply each term). Funds are disbursed to the student's account to cover any expenses for the program/courses to cover instructional costs (tuition, fees, books, materials, supplies, etc.) associated with an eligible program as listed below. Any balance of funds will be allocated to the student. **Eligible programs**: Fire Protection Technology, Public Safety Administration, Emergency Management or Emergency Medical Science curriculum associate degree programs and Workforce Continuing Education courses that tie directly to a college's approved EMS Bridging program and is specifically part of the student's pathway to EMS associate degree completion. **Eligibility Requirements:** 1) Successful completion of a Career & College Promise – Workforce Continuing Education (CCP – WCE) Fire Academy pathway; and 2) Successfully complete courses covered by the scholarship in any previous term to be eligible for funding in a subsequent term.

College Name	

Student Information (please print)

Full Name	
Home Address	
City/State/Zip Code	
Email Address	
Phone Number	
Mobile Number	

Specify Term Applying For: _____ *(Example: Fall 2023, Spring 2024, Summer 2024)*

List eligible course(s)/associated degree program student has enrolled in for the term specified:

__ **I have provided evidence that I have successfully completed a WCE CCP Fire Academy Pathway.**
__ **If I was awarded this scholarship in the past, I have provided evidence of successfully completing previous courses.**
__ **I have read and understand the requirements for this funding. I hereby declare that the information provided on this form is complete and correct to the best of my knowledge.**

_____   _____
                Applicant's Signature   **Date**