

Montgomery County Literacy Network
VIST Financial Building, Suite 311
1767 Sentry Parkway West
Blue Bell, PA 19422

Scholarship Program Application

(To the extent possible, MCLN will keep the information on this form confidential)

Date of Application _____

General Information

Student's Name _____

Street Address _____ Apt. # _____

City _____ State _____ Zip _____

Phone number _____ E-mail address _____

Are you 18 years of age or older? Yes _____ No _____

Please describe why you are requesting assistance. Include details such as course fees, transportation, books and examination fees.

Literacy Agency

Name of your literacy agency _____

Address of literacy agency _____

Name and title of contact person at literacy agency

Name _____ Title _____

Contact's phone # _____ Fax or email _____

How long have you been attending classes at this agency? _____

How many days per week are you in class? _____

How many hours per week are you in class? _____

Test / Test Center Information

Have you ever taken the GED test before? _____

If yes, when and at what test center? _____

What is your proposed test date? _____

Where are you planning to take the GED test?

Name of test center _____

▪ Address of test center _____

▪ Phone number of test center _____

Are you planning to take the full GED test? _____

If yes, what is the cost of the full test at the test center? _____

If you are planning to take a “retake” of one or more parts of the test, tell us which parts and what the cost will be _____

Payment Details

Please designate dollar amount requested _____

Note: If your scholarship application is approved, you will be notified by MCLN and the check will be sent directly to the test center you designated above. Depending on the amount of the scholarship awarded, you will be responsible to pay the difference.

***In addition to submitting this application, the applicant must enclose a personal letter explaining why the MCLN Scholarship Board should consider approving this request.**

MCLN must receive this application and personal letter at least one full month prior to the proposed test date.

Mail application and student letter to

Molly Lackman
1060 First Avenue, Suite 430
King of Prussia, PA 19406

OR

E-mail completed application and your student letter (as e-mail attachments in Microsoft Word document or in PDF format) to the following address:

mclntreasurer@gmail.com