



**Deep Well Scholarship Application**  
**for Students Attending Technical College of the Lowcountry**  
**(Please print)**

Please complete the application and submit with the following attachments:

- 1) Proof of admission to Technical College of the Lowcountry (TCL)
- 2) Copy of TCL financial aid award letter
- 3) Copy of Class Schedule, if available

Full Name \_\_\_\_\_ Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Parents/Guardian \_\_\_\_\_

Marital Status \_\_\_\_\_ Are you the Head of the Household? \_\_\_\_ Yes \_\_\_\_ No

Year graduated/graduating from High School \_\_\_\_\_ OR Year obtained GED \_\_\_\_\_

Are you the first in your family to attend college? Yes \_\_\_\_ No \_\_\_\_

Program of study you will be pursuing at TCL \_\_\_\_\_

What is your college goal? (Ex. - 2-year degree, certificate, 4-year degree) \_\_\_\_\_

List your participation in other activities (school, community, church, etc) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any costs related to college that would be difficult for you to cover, such as transportation, gas, computer, child care, or other.

---

---

---

---

---

List jobs you have held in the last two years.

Employer	Dates	Hours per week

What goals/accomplishments have you set? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Explain why you would be an appropriate person to receive this scholarship \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List other financial aid for which you have applied \_\_\_\_\_  
\_\_\_\_\_

I confirm that the above information is accurate to the best of my knowledge. I hereby acknowledge that my signature authorizes and gives full consent to Deep Well to utilize and publish any photographic, video, audio or digital images or recordings in which myself appears in any form, including but not limited to newsletters, advertisements, promotional materials and social media, and further waives any claim to any royalties, proceeds or other benefits derived from the same.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please submit completed form to the Deep Well office at 80 Capital Drive, Hilton Head Island or mail it to The Deep Well Project, P.O. Box 5543, Hilton Head Island, SC 29938.