



PENNSYLVANIA STATE GEAR UP SCHOLARSHIP PROGRAM APPLICATION

The following information is needed so that your application can be considered for the Pennsylvania State GEAR UP Scholarship Program.

Mail this application to: **PHEAA**
State Grant and Special Programs
P.O. Box 8114
Harrisburg, PA 17105-8114

| | | | | | | |
|--|---|------------------------|------------------------|---------------|--|---|
| Last Name | First Name | M.I. | Social Security Number | | | |
| Address (NOTE - P.O. Box addresses must be accompanied by a street address) | | City | | State | | |
| | | | | Zip Code | | |
| Telephone Number Home () Work () | | E-mail Address | | Date of Birth | | |
| <p>Student High School (Circle One):</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <p><u>Harrisburg School District</u></p> <p>Harrisburg High School</p> <p>William Penn High School (ACTS or CTA)</p> <p>SciTech High School</p> </td> <td style="width: 50%; vertical-align: top;"> <p><u>School District of Philadelphia</u></p> <p>John Bartram Main High School</p> <p>Young Women's Leadership School at E.W. Rhodes High School</p> <p>Strawberry Mansion High School</p> <p>Martin Luther King High School</p> </td> </tr> </table> | | | | | <p><u>Harrisburg School District</u></p> <p>Harrisburg High School</p> <p>William Penn High School (ACTS or CTA)</p> <p>SciTech High School</p> | <p><u>School District of Philadelphia</u></p> <p>John Bartram Main High School</p> <p>Young Women's Leadership School at E.W. Rhodes High School</p> <p>Strawberry Mansion High School</p> <p>Martin Luther King High School</p> |
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| Year of High School Graduation (CCYY): | | | | | | |
| <p><i>Student Certification Statement</i></p> <p>As a participant in the PA State GEAR UP program, I understand that I may be eligible for financial grant(s) through the Pennsylvania State System of Higher Education (PASSHE) and/or the Pennsylvania Higher Education Assistance Agency (PHEAA) when I attend an eligible program of study at a federal Title IV eligible post-secondary school in Pennsylvania. In compliance with the Family Educational Rights and Privacy Act of 1974 (FERPA), by completing and signing this form, I authorize PASSHE, PHEAA, my participating PA State GEAR UP secondary school, the Pennsylvania college(s) or school(s) that I list on my Free Application for Federal Student Aid or in which I enroll, and banking institutions (in order to facilitate the processing of any financial grant(s)), to share personally identifiable information, including my Social Security number, academic records, records of PA State GEAR UP participation, and any other information necessary for the administration of the PA State GEAR UP scholarship and coordination of financial aid and support services. This authorization includes allowing PASSHE and PHEAA (i) to access and review any application for financial aid made by me; and (ii) to alert staff at Pennsylvania colleges and universities about my participation in PA State GEAR UP so I can receive all of the financial aid and support services for which I am eligible. I understand that only authorized officials of the above-named entities will be allowed access to my personally identifiable/confidential information. I give my permission to PASSHE and PHEAA to use photographs, slides, moving pictures, or television tapes of me, as needed for public relations and marketing purposes as related to the PA State GEAR UP program. This may include, among other things, posting pictures to the PA State GEAR UP, PASSHE and/or PHEAA website(s).</p> <p>I understand that the receipt of a PA State GEAR UP scholarship is contingent upon completing all of the requirements of PA State GEAR UP students and is subject to certain income eligibility requirements based on my family's income at the time of application for the scholarship. I understand that receipt of a full or partial PA State GEAR UP scholarship is contingent upon the availability of scholarship funds. In the event sufficient funds are not available to provide full scholarships to all eligible PA State GEAR UP students, the funds will be allocated among eligible students based on financial need and other criteria to be established by PHEAA.</p> | | | | | | |
| APPLICANT SIGNATURE _____ | | DATE SIGNED _____ | | | | |
| Parent or Legal Guardian Signature _____ (Required only if the applicant is less than eighteen years of age.) | | Date Signed _____ | | | | |
| Print Parent or Legal Guardian Name _____ | | Telephone Number _____ | | | | |