



SOUTHEASTERN
COMMUNITY COLLEGE

**TRUSTEES' HONORS SCHOLARSHIP
STATEMENT OF ACCEPTANCE**

NAME _____

SOCIAL SECURITY NUMBER _____

ADDRESS _____

CITY, STATE, ZIP _____

HIGH SCHOOL ATTENDED _____

DATE OF HIGH SCHOOL GRADUATION _____

I plan to enroll at Southeastern Community College as a full-time student during the

_____ Term, _____.
(Fall, Spring, Summer) (Year)

Student Signature _____

Date _____

Certification

I hereby certify that _____ graduated as the

Valedictorian

Salutatorian

according to cumulative grade point average from

_____ on _____.
(name of high school) (graduation date)

Signed _____

Counselor or Principal

Date _____

Submit application to: Southeastern Community College
Attn: Financial Aid Office
1500 West Agency Road, P.O. Box 180
West Burlington, IA 52655