

## SIGNATURE PAGE

**\*This page REQUIRES signatures. Please complete by printing, obtain signatures and attach/upload to online application. Please have Sponsor or Supervisor sign where indicated.**

*If you have any questions please call 812-988-4882 or email [scholarships@bccfin.org](mailto:scholarships@bccfin.org)*

**I, the applicant, agree that I have reviewed, understood and agreed to the following agreement pages:**

- Personal Information Release (Application page 8)
- Statement of Agreement (Application page 9)

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Applicant Signature (required)

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Date

**I, the applicant's parent/legal Guardian, agree that I have reviewed, understood and agreed to the following agreement pages:**

- Personal Information Release (Application page 8)
- Statement of Agreement (Application page 9)

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Parent/Legal Guardian Signature (required)

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Date

## CURRENT EMPLOYER SIGNATURE

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Business Name

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Dates of Applicant Employment

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Current Employer Signature (required)

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Date