

## **Cochise College Community Partner Upskilling Scholarship Application**

Cochise College is excited to announce a new scholarship opportunity to upskill and reskill Cochise County's workforce. The Community Partner Upskilling Scholarship allows Cochise County employers to partner with Cochise College to provide educational training opportunities for their employees through a tuition & fee match program of up to \$5000 per employer per academic year.

This scholarship application is now open, and funds will be awarded for classes beginning in March 2025. The scholarship can be used for any for-credit or non-credit course offered by Cochise College or Cochise College's Center for Lifelong Learning.

### <u>To Participate</u>

- 1. Community Partners will identify employee(s) and submit a Community Partner Upskilling Scholarship application.
- 2. Once the selection process is complete, the college will contact the Community Partners to begin the college admission process for the awarded individuals. Student(s) must apply to the college and complete all admission and registration requirements for the course.

### <u>Eligibility</u>

- 1. Employers must be located in Cochise County.
- 2. Eligibility of the students will be determined by the employer and will be dependent on the training needed.
- 3. Funds must be used for classes to upskill or reskill an employee to assist in advancing their career with the employer. This training must be identified in the scholarship application.
- 4. Funds will be limited to \$,5000 matched funds per employer per year
- 5. Funding will be provided on a first-come, first-served basis, dependent on the timing of training opportunities

### **Application Procedure**

Completed applications must be emailed to Cochise College Workforce Development at scarboroughc@cochise.edu. Please contact Cullen Scarborough, Dean of Workforce Development, at 520-515-3631 for additional information.

# Cochise College Community Partner Upskilling Scholarship Application

1. Name of Employer	
2. Employer Point of Contact	
Address (street or box)	
(city, state, zip code)	
PhoneEmail Address	
Selected Employee/Student (Applicant) Information	
1. First Employee:	
Name:	-
Email Address:	
Phone:	_
Cochise College ID #:	
Requested Cochise College Course/s or Training:	
Date of Cochise College Course/s or Training:	
Total Cost of Cochise College Course/s or Training:	
Employer Cost of Cochise College Course/s or Training:	
2. Second Employee:	
Name:	
Email Address:	
Phone:	_
Cochise College ID #:	
Requested Cochise College Course/s or Training:	
Date of Cochise College Course/s or Training:	
Total Cost of Cochise College Course/s or Training:	
Employer Cost of Cochise College Course/s or Training:	
3. Third Employee:	
Name:	-
Email Address:	
Phone:	_
Cochise College ID #:	
Requested Cochise College Course/s or Training:	
Date of Cochise College Course/s or Training:	
Total Cost of Cochise College Course/s or Training:	
Employer Cost of Cochise College Course/s or Training:	