



Scholarship Application

Tell us about yourself

Today's Date: _____

Student's Name _____ M / F (circle one) Current Grade _____

School Name _____ Parents' Names _____

City _____ Zip _____ Primary Phone Number _____

Secondary Phone Number _____ Email _____

Preferred method of contact: _____ Best time to contact: _____

Academic Goals

I am interested in applying for a scholarship for:

_____ Our Tutoring Program(s) _____ Our Private School _____ Our Online course(s)

Describe why you are interested in this education: _____

Academic History

Please specify academic courses your student has struggled with in the past: _____

Submit to the Omega Learning® Center nearest to you or
franchise@omegalearning.com.

Find a center: <https://omegalearning.com/find-tutors>

Office Notes



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