

2018 CCCSFAAA STUDENT SCHOLARSHIP
California Community Colleges Student Financial Aid Administrators Association
Application

PERSONAL INFO: *(Please print)* School ID Number _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____ Email: _____

Which community college are you attending Spring 2018? _____

Educational Program: _____ Transfer Associate Degree Certificate

Career objective(s): _____

Current number of units for Spring 18 enrollment: _____

STATEMENT OF CANDIDACY:

On a separate sheet of paper, submit a statement explaining your:

- o Special circumstances and/or unusual hardship
- o Educational and career goals
- o Why you have chosen these goals
- o Any community involvement or leadership roles which you may have had.

All Statements of Candidacy must be typed or electronically completed and double-spaced on white paper.

PERMISSION STATEMENT:

If you are selected for a scholarship, do you give CCCSFAAA permission to use the information from your application or statement of candidacy for publicity purposes?

Yes _____ No _____ Photograph/Picture attached _____

Student Signature: _____ Date: _____

Please return to:

APPLICATION DEADLINE IS: _____