

North Orange County Community College District CYPRESS COLLEGE SCHOLARSHIP APPLICATION

Scholarship Application Available Online

<http://www.cypresscollege.edu/~pio/documents/scholarship-app-2008.pdf>

MINIMUM SCHOLARSHIP REQUIREMENTS

- 9 or more units completed at Cypress College. ***IF YOU HAVE COMPLETED MORE THAN 70 UNITS, PLEASE EXPLAIN WHY YOU HAVE NOT YET TRANSFERRED.***
- Cypress College grade point average (GPA) of 2.5 or higher
- Enrolled in and will complete a minimum of 9 units in the Spring 2008 Semester.
- Will enroll at Cypress College in the Fall 2008 semester with a minimum of 9 units (scholarships are not transferable to another college)
- Resident of the state of California

DIRECTIONS (please read carefully)

- Complete application. Attach additional sheets if necessary.
- It is recommended, but not required, that you attach a letter of recommendation from a Cypress College faculty or staff member or other evidence of achievements or community involvement.
- Submit application no later than **March 1, 2008** to the **FINANCIAL AID OFFICE**.

GENERAL INFORMATION

Scholarship awards generally range from \$100 to \$500. Successful candidates will be notified in April and will be expected to participate in our Scholarship Awards Presentation in May. Most scholarship funds are held until fall enrollment is verified.

STUDENT INFORMATION - (PLEASE TYPE OR PRINT)

Mark One: Mr. Mrs. Ms. Miss

First Name: _____ Last Name: _____ Perm #: _____

Address: _____ SS #: _____

City: _____ State: _____ Zip: _____ Phone: _____

e-mail: _____

EDUCATION

Are you a high school graduate? Yes No

If yes, name of school: _____

Other colleges attended (if any): _____ From: _____ To: _____

_____ From: _____ To: _____

Total Cypress College units completed to date: _____ Units in progress: _____ Cumulative GPA: _____

Major: _____ If RN, Psych Tech, Rad Tech, Dental Hygiene, or Mortuary Science major, have you been officially accepted into the program? Yes No

Career Goal: _____

University to which you intend to transfer? _____ When? _____

Will you be returning to Cypress College in the fall? Yes No Number of units you expect to take: _____

NOTE: ONLY STUDENTS ATTENDING THE FALL SEMESTER AT CYPRESS COLLEGE ARE ELIGIBLE FOR THESE SCHOLARSHIPS.

On a separate sheet of paper, please submit *typed* answers to the following questions (handwritten essays will not be accepted):

- 1) What inspired you to seek an education?
- 2) What are your career aspirations upon completion?
- 3) Why do you wish to continue your education and why do you believe you should be awarded a scholarship? Please indicate any special or unusual circumstances of which you would like the scholarship committee to be aware, including such things extensive personal and family medical problems, reduction in family income, one-parent family, etc.
- 4) List and explain all pertinent information relating to your participation in extracurricular activities, including leadership roles during the '07/08 school year. Include college activities (student government, committees, clubs, intercollegiate athletics) and community activities (church, service clubs, volunteer work, etc).

STUDENT'S FINANCIAL INFORMATION

Mark one: Single Married Divorced Separated Widowed

Do you reside with your parent(s)? Yes No (If yes, complete the box below.)

Are you dependent on them for any expenses? Yes No

How many other dependent children live at home? _____

Father's employer: _____ Monthly Gross Salary \$ _____

Mother's employer: _____ Monthly Gross Salary \$ _____

Do you have dependent children? _ No _ Yes Ages: _____ Number in College: _____

Your employer: _____ Monthly gross salary \$ _____

Spouse's employer: _____ Monthly gross salary \$ _____

Other income (SS, AFDC, Veteran's benefits, Pell Grants, BOGG, and/or EOPS Grants) \$ _____

Current College Financial Aid \$ _____

How much will you be able to contribute toward your education from next summer's earnings? \$ _____

If you do not plan to work in the summer, please explain why:

List your employment since **June of 2006**:

<u>Employer</u>	<u>Job Title</u>	<u>Dates (from/to)</u>	<u>Hourly Rate</u>
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RELEASE

I hereby authorize release of all the foregoing scholarship and transcript information to any organization or individual involved in the selection of scholarship recipients. I also give permission to release my name to the donor and newspapers for publicity purposes. I understand that my picture will be taken and used in publicity.

Signature of Applicant

Date