



California Coast Credit Union Scholarship \$500 (4)

Applications can be obtained from the Financial Aid & Scholarship Services Office (K1-312) online at:
<http://www.sdmiramar.edu/campus/scholarship-office/applications>

Selection Criteria

- Recipient must be currently enrolled in at least 9 units at San Diego Miramar College for the 2022 Spring Semester
- Recipient must be a U.S. citizen or a permanent resident
- At the time of application, recipient must have completed a minimum of 9 units at San Diego Miramar College
- Recipient must be involved in an active leadership role in a community service organization or demonstrated community service prior to applying.
- Submit two letters of recommendation from any community service organization, college faculty, or anyone that can attest for your skills and accomplishments.

Two scholarships in the amount of \$500.00 each will be awarded upon verification of enrollment during the Spring 2022 semester.

Two scholarships in the amount of \$500.00 each will be awarded upon verification of enrollment during the Fall 2022 semester.

INSTRUCTIONS:

All scholarship applications must be submitted to the Financial Aid & Scholarship Services Office (K1-312) or by email to: mirascholarships@sdccd.edu

Required application attachments should be submitted together with your scholarship application. To send attachments separately (references, letters of recommendation, transcripts, etc.) include the applicant's name, student ID#, and the name of the scholarship in the subject line. Please use separate emails for different scholarships.

Application Deadline
February 17, 2022

San Diego Miramar College
Financial Aid & Scholarship Services Office, K1-312
10440 Black Mountain Road
San Diego, CA. 92126 Phone: (619) 388-7864

California Coast Credit Union scholarship application

PERSONAL INFORMATION

NAME:		STUDENT ID#:	
ADDRESS:			
CITY:		STATE:	ZIP CODE:
PHONE:	E-MAIL:		

ACADEMIC INFORMATION

CURRENT CUMULATIVE GPA:		MAJOR/FIELD OF STUDY:	
NUMBER OF UNITS COMPLETED AT SAN DIEGO MIRAMAR COLLEGE:		NUMBER OF UNITS CURRENTLY ENROLLED AT SAN DIEGO MIRAMAR COLLEGE:	
Do you plan to transfer?	YES NO	If so, when/where:	

ADDITIONAL APPLICATION REQUIREMENTS:

- A one-two page essay doubled space typed:

Please explain what motivates you to give back to your community through service.
- Submit two letters of recommendation from any community service organization, college faculty, or anyone that can attest for your skills and accomplishments.

CERTIFICATION AND RELEASE

I hereby certify that the information contained in this application is true and correct to the best of my knowledge. I understand that I will not be eligible for this scholarship if I have misrepresented myself in any way. I authorize the necessary persons to have access to my student records in the processing of this application.

SIGNATURE:		DATE:	
Your application must be received by the Financial Aid & Scholarship Services Office by February 17, 2022		San Diego Miramar College Financial Aid & Scholarship Services Office, K1-312 10440 Black Mountain Road San Diego, CA 92126 Phone: (619) 388-7864 Fax: (619) 388-7910	

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SCHOLARSHIP "THANK YOU" LETTER

The donors of scholarships have dedicated themselves to raising money to help students reach their educational and vocational dreams. Many of our members are from non-profit organizations who take great pleasure and time to raise funds for our student scholars.

All 2022 scholarship recipients will be required to provide a "Thank You" Letter to the donor expressing your sincere appreciation of the award(s).

By signing below you agree to comply with the statement listed above.

Applicant Signature:

Date:

Print Name:

RELEASE OF INFORMATION *(required)*

As a scholarship recipient, I authorize the Miramar College Foundation and the San Diego Miramar College Financial Aid & Scholarship Services Office to use my information (name, scholarship, amount, and pictures) for press and media purposes. Please return this form to the Financial Aid & Scholarship Services Office, K1-312.

Name:

Address:

City:

State:

Zip Code:

Applicant Signature:

Date: