

Erica Selene Cortez Memorial Scholarship \$500 (2)

Applications can be obtained from the Financial Aid & Scholarship Office Services (K1-312) and also online at: http://www.sdmiramar.edu/students/scholarshipoffice/scholarships

SELECTION CRITERIA:

- Pursuing a career in the Automotive Technology Program at Miramar College
- Currently enrolled in at 6 units at San Diego Miramar College
- Completed a minimum of 12 units at San Diego Miramar College
- Grade point average of 2.8 or higher

Two scholarship in the amount of \$500 each will be awarded. The scholarship recipients will be notified by March 18, 2022 and will be invited to attend the Miramar College Scholarship Awards Ceremony on April 27, 2022.

INSTRUCTIONS:

All scholarship applications must be submitted to the Financial Aid & Scholarship Office 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

ERICA SELENE CORTEZ MEN PERSONAL INFORMATION	VIURIAL	scholars	nib abl	piication	MIRAN
NAME:			STUDE	NT ID#:	
ADDRESS:					
CITY:		STATE:		ZIP CODE:	
PHONE:	E-MAIL:				
ADDITIONAL ACADEMIC INFORMATION					
CURRENT CUMULATIVE GPA:		MAJOR/FIELD OF STUDY:			
NUMBER OF UNITS CURRENTLY ENROLLED SAN DIEGO MIRAMAR COLLEGE:					
SSAY - Why attending San Diego Miramar Co	0	otive Tech	nology P	rogram is imp	ortant to you and
what you hope to achieve after completing y	our studies.				
CERTIFICATION AND DELEASE					
hereby certify that the information contained					,
hereby certify that the information contained understand that I will not be eligible for this	s scholarship i	f I have mi	sreprese	ented myself in	any way. I authorize
CERTIFICATION AND RELEASE I hereby certify that the information contained understand that I will not be eligible for this the necessary persons to have access to my second that I will not be expected to the property of the pro	s scholarship i	f I have mi	sreprese rocessin	ented myself in g of this applica	any way. I authorize
hereby certify that the information contained understand that I will not be eligible for this	s scholarship i	f I have mi	sreprese	ented myself in g of this applica	any way. I authorize
hereby certify that the information containe understand that I will not be eligible for this the necessary persons to have access to my s	s scholarship i	f I have mi	rocessin DAT	ented myself in g of this applica E:	any way. I authorize ation.
hereby certify that the information containe understand that I will not be eligible for this he necessary persons to have access to my s	s scholarship i	f I have mi ds in the p	rocessin DAT	ented myself in g of this applica E: Diego Mirama	any way. I authorize ation.
hereby certify that the information contained understand that I will not be eligible for this the necessary persons to have access to my soliGNATURE: Your application must be received by the solic property of the solic	s scholarship i student record	f I have mi ds in the p	processing DAT San al Aid &	ented myself in g of this applica E: Diego Mirama Scholarship Se	any way. I authorize ation. r College rvices Office, K1-312
hereby certify that the information contained understand that I will not be eligible for this the necessary persons to have access to my soliGNATURE: Your application must be received by the Financial Aid & Scholarship Services Office	s scholarship i student record	f I have mi ds in the p	sreprese rocessing DAT San al Aid & 1044	ented myself in g of this applica E: Diego Mirama Scholarship Sel 10 Black Mount	r College rvices Office, K1-312 tain Road
hereby certify that the information contained understand that I will not be eligible for this the necessary persons to have access to my soliGNATURE: Your application must be received by the solic property of the solic	s scholarship i student record	f I have mi ds in the p	San al Aid & San S	ented myself in g of this applica E: Diego Mirama Scholarship Sei IO Black Mount an Diego, CA	r College rvices Office, K1-312 tain Road
hereby certify that the information contained understand that I will not be eligible for this he necessary persons to have access to my soliGNATURE: Your application must be received by the Financial Aid & Scholarship Services Office	s scholarship i student record	f I have mi ds in the p	San al Aid & San Ph	ented myself in g of this applica E: Diego Mirama Scholarship Sei 10 Black Mount an Diego, CA S	r College rvices Office, K1-312 tain Road 92126 8-7864
hereby certify that the information contained understand that I will not be eligible for this the necessary persons to have access to my soliGNATURE: Your application must be received by the Financial Aid & Scholarship Services Office	s scholarship i student record	f I have mi ds in the p	San al Aid & San Ph	ented myself in g of this applica E: Diego Mirama Scholarship Sei IO Black Mount an Diego, CA	r College rvices Office, K1-312 tain Road 92126 8-7864
hereby certify that the information contained understand that I will not be eligible for this the necessary persons to have access to my sold signature: Your application must be received by the Financial Aid & Scholarship Services Office	s scholarship i student record	f I have mi ds in the p	San al Aid & San Ph	ented myself in g of this applica E: Diego Mirama Scholarship Sei 10 Black Mount an Diego, CA S	r College rvices Office, K1-312 tain Road 92126 8-7864
hereby certify that the information contained understand that I will not be eligible for this the necessary persons to have access to my standard and the standard access to my	s scholarship i student record he ce by	f I have mi ds in the p Financi	San al Aid & 1044 S	ented myself in g of this applica E: Diego Mirama Scholarship Sei IO Black Mount an Diego, CA S none: (619) 388-	r College rvices Office, K1-312 tain Road 92126 8-7864
hereby certify that the information contained understand that I will not be eligible for this the necessary persons to have access to my solic SIGNATURE: Your application must be received by the Financial Aid & Scholarship Services Office February 17, 2022	s scholarship i student record he ce by	f I have mi ds in the p Financi	San al Aid & 1044 S	ented myself in g of this applica E: Diego Mirama Scholarship Sei IO Black Mount an Diego, CA S none: (619) 388-	r College rvices Office, K1-312 tain Road 92126 8-7864
hereby certify that the information contained understand that I will not be eligible for this the necessary persons to have access to my standard persons to have access t	he ce by	f I have mi ds in the p Financia	San al Aid & 1044 SPh	ented myself in g of this applica E: Diego Mirama Scholarship Sel 10 Black Mount an Diego, CA S none: (619) 388- ship Services O	r College rvices Office, K1-312 tain Road 92126 8-7864 -7910 Office (K1-312) or by
hereby certify that the information contained understand that I will not be eligible for this he necessary persons to have access to my standard persons to have access to have a	s scholarship is student record he see by submitted tog	f I have mids in the p Financial Aid &	San al Aid & 1044 SPh	ented myself in g of this applica E: Diego Mirama Scholarship Sel 10 Black Mount an Diego, CA S none: (619) 388- ship Services O	r College rvices Office, K1-312 tain Road 92126 8-7864 -7910 Office (K1-312) or by

scholarships.



Applicant Signature:

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.

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:			

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