



Miramar Managers Scholarship \$500

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

SELECTION CRITERIA:

- Currently enrolled at San Diego Miramar College with a minimum of 12 units
- Must have completed at least 12 units with a minimum grade point average of 3.0 at San Diego Miramar College
- Evidence of leadership skills and the use of such skills to make a difference at San Diego Miramar College and/or in your community

1 scholarship in the amount of \$500 will be awarded. The scholarship recipients will be notified by March 26, 2018 and will be invited to attend the San Diego Miramar College Scholarship Awards Ceremony on April 25, 2018.

INSTRUCTIONS:

All scholarship applications must be submitted to the Financial Aid & Scholarship 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
March 14, 2018

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

MIRAMAR MANAGERS 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 MIRAMAR COLLEGE:		NUMBER OF UNITS CURRENTLY ENROLLED AT MIRAMAR COLLEGE:
DO YOU PLAN TO TRANSFER?	YES NO	IF YES, WHEN/WHERE:

APPLICATION REQUIREMENTS:

1. ESSAY – A 500-word essay describing how your leadership has made a difference at Miramar College and/or in the community.
2. SUBMIT TWO LETTERS OF RECOMMENDATION – These should address an example of leadership that made a difference at San Diego Miramar College and/or in your community.
3. SUBMIT TRANSCRIPT(S) – Unofficial copies are acceptable.

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
<p>Your application must be received by the Financial Aid & Scholarship Office no later 7:00PM on Wednesday, March 14, 2018</p>	<p>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</p>

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.

(SPACE PROVIDED FOR ESSAY)

(SPACE PROVIDED FOR ESSAY)



**SCHOLARSHIP AWARDS CEREMONY ATTENDANCE
&
"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.

If you are a winner of this year's scholarship(s), you are expected to attend the Scholarship Award Ceremony held on April 25, 2018. The event time is tentatively scheduled from 1-5pm.

All 2018 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 statements 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: