



Women's Soccer Scholarship (2) (Non-Resident) \$750 - \$1,250

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:

- Must be a non-resident student
- Enrolling at San Diego Miramar College to pursue Athletic endeavors (Women's Soccer)
- Enrolled in at 12 units at San Diego Miramar College Fall 2018
- Grade point average of 2.8 or higher

2 scholarships in the amount ranging \$750 - \$1,250 will be awarded. The scholarship recipients will be notified by June 1, 2018.

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.

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

Application Deadline:
May 1, 2018

San Diego Miramar College
Financial Aid & Scholarship Services Office, K1-312
10440 Black Mountain Road
San Diego, CA. 92126

WOMEN'S SOCCER SCHOLARSHIP



Non-Resident Application

PERSONAL INFORMATION

NAME:		STUDENT 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:	

APPLICATION REQUIREMENTS:

Enrolling at San Diego Miramar College
Playing on the Women's Soccer Team

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, K1-312, no later than 7:00pm on Tuesday, May 1, 2018.	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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San Diego Miramar College
Financial Aid & Scholarship Services Office
10440 Black Mountain Road
San Diego, CA 92126

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 Financial Aid & Scholarship Services Office, K1-312.

Name:

Address:

City:

State:

Zip Code:

Applicant Signature:

Date:

PERSONAL INVITATION *(optional)*

If you are selected to receive a scholarship, you will be invited to attend the annual award ceremony. Attendance is optional, but highly recommended and is a great opportunity to commemorate your accomplishment. The Financial Aid & Scholarship Services can send an invitation, on your behalf, to any faculty/staff member that has made a positive impact during your college experience. Please provide the names and departments for up to 2 guests along with any special comment you would like to publicly share.

Name:

Department:

Special Comment:

Name:

Department:

Special Comment:

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