

SAN DIEGO MIRAMAR COLLEGE

I Love English Scholarship (2) \$250

Applications can be obtained from the Financial Aid & Scholarship Services Office (K1-312) and also 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 20 units with a minimum grade point average of 3.00 at Miramar College
- Must have taken at least one Basic Skills English Class with a “B” or better
- Must demonstrate financial need by completing the 2017-18 FAFSA Application
- Must submit San Diego Community College District unofficial transcript

2 scholarships in the amount of \$250 will be awarded. The scholarship recipients will be notified by March 15, 2019 and will be invited to attend the San Diego Miramar College Scholarship Awards Ceremony on April 10, 2019.

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 14, 2019

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

I Love English! scholarship application

PERSONAL INFORMATION

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

ADDITIONAL ACADEMIC INFORMATION

CURRENT CUMULATIVE GPA:		MAJOR/FIELD OF STUDY:	
HAVE YOU COMPLETED ANY BASIC SKILLS ENGLISH CLASSES:	YES NO	COMPLETED 2017-18 FAFSA APPLICATION ATTACHED SDCCD UNOFFICIAL TRANSCRIPT	YES/NO YES/NO
LIST ENGLISH CLASS(ES) AND GRADES EARNED			

APPLICATION REQUIREMENTS:

1. Submit an essay describing your educational journey as you have overcome challenges and the importance and value of having taken one or more Basic Skills English courses.
2. Submit one letter of recommendation from Miramar College English/ESOL Faculty.

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 Thursday, February 14, 2019.	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 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 Awards Ceremony held on Wednesday, April 10, 2019. The event time is tentatively scheduled from 1-5pm.

All 2019 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:	