

Filipino American Student Scholarship \$250

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 in a minimum of 6 units at San Diego Miramar College
- Must have completed at least 12 units at San Diego Miramar College
- Must be in good academic standing, with a minimum 2.5 GPA
- Must demonstrate strong leadership experience in promoting Filipino/Filipino
 American cultural awareness at school and/or in the community

1 scholarship 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

Filipino American Student scholarship application



PERSONAL INFORMATION						
NAME:			STUDENT ID#:			
IVAIVIE:			STODENT ID#:			
ADDRESS:						
ADDRESS:						
CITY:		STATE:		ZID CODE.		
CITY:		STATE:		ZIP CODE:		
DUONE.	E NAAII.					
PHONE:	E-MAIL:					
ACADEMIC INFORMATION						
		MAJOR/FIELD OF STUDY:				
CURRENT CUMULATIVE GPA:		MAJOR/FIELD OF STODY:				
NUMBER OF UNITS		NUMBER OF UNITS COMPLETED				
NUMBER OF UNITS		AT SAN DIEGO MIRAMAR COLLEGE:				
CURRENTLY ENROLLED:		AT SAN DIEGO MINAMAN COLLEGE.				
ADDITIONAL APPLICATION REQUIREMENTS:						
A one-two page, typed essay on how you have gone about promoting Filipino, Filipino/American cultural						
awareness at school and/or in the community						
Two letters of recommendation. One letter must be from a faculty member and the other may be from a						
community member, employer, etc.						
Unofficial copy of Transcript(s)						
CERTIFICATION AND RELEASE						
I hereby certify that the information contai	ned in this app	olication is t	rue 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	<u>:</u>		
			Can Di	aga Miramar Callaga		
Version Performance II and the constraint in		San Diego Miramar College Financial Aid & Scholarship Services Office, K1-312				
Your application must be received by t	<u> </u>					
Financial Aid & Scholarship Office, K1-31		10440 Black Mountain Road San Diego, CA 92126 Phone: (619) 388-7864				
later than 7:00pm on Thursday, Februar	/ 14,					
2019.						
		Fax: (619) 388-7910				
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student ID#, and the name of the scholarship in the subject line. Please use separate emails for different scholarships.



Applicant Signature:

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.

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:					
State:	Zip Code:				
Applicant Signature:					
	, I authorize the Miramar Coll nancial Aid & Scholarship Serv arship, amount, and pictures) the Financial Aid & Scholarsh				