

University of Phoenix Scholarship \$1,000

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

The University of Phoenix Scholarship is designed to support a student who is on the path to transfer to a four-year college. This scholarship embodies the University of Phoenix Mission of providing access to higher education opportunities that enable students to develop knowledge and skills necessary to pursue their professional goals, improve the performance of their organizations, and provide leadership and service to their communities. We understand the challenges of working adults and are dedicated to helping these hard-working students achieve their educational and career goals.

Selection Criteria

- Must be transferring to a 4-year college
- Must be in good academic standing, with a minimum 2.5 GPA
- Must demonstrate leadership and community service

1 scholarship in the amount of \$1,000 will be awarded. The scholarship recipients will be notified by March 20, 2020 and will be invited to attend the San Diego Miramar College Scholarship Awards Ceremony on April 22, 2020.

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 13, 2020

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

University of Phoenix 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 CURRENTLY ENROLLED:		NUMBER OF UNITS COMPLETED AT SAN DIEGO MIRAMAR COLLEGE:			
		I			
ADDITIONAL APPLICATION REQUIREMENT	S:				
ESSAY: Please describe your educational and professional goals and a life experience that inspired you to pursue your desired career.					
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 t Financial Aid & Scholarship Office, K1-31: later than 7:00pm on Thursday, February 2019.	2, no	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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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 22, 2020. The event time is tentatively scheduled from 1-5pm.

All 2020 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:					
City:	State:	Zip Code:			
Applicant Signature:		Date:			