

LGBTQ+ Student Scholarship \$100

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

SELECTION CRITERIA:

- Must have completed a minimum of 6 units at San Diego Miramar College
- Must be currently enrolled in a minimum amount of 9 units at San Diego
 Miramar College
- Must have a minimum 2.0 GPA
- Must demonstrate community service

One scholarship in the amount of \$100 will be awarded.

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: January 8, 2021

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



LGBTQ+ scholarship application					
PERSONAL INFORMATION					
NAME:		STUDENT ID#:			
ADDRECC.					
ADDRESS:					
CITY:		STATE:		ZIP CODE:	
PHONE:	E-MAIL:				
ACADEMIC INFORMATION					
CURRENT CUMULATIVE GPA:		MAJOR/FIELD OF STUDY:			
ADDITIONAL APPLICATION REQUIREMENTS	Ş∙				
ADDITIONAL AFFLICATION REQUIREIVIENTS.					
1. Please write an essay of 500-1000 w	ords on the fo	ollowing top	ic:		
Write about a time you overcame a challenge based on your gender identity or sexual orientation.					
The challenge may be defined broadly. For instance, it may have been emotional, psychological, physical, based on relationships with family, friends, or community members, or something internal. Please use a					
standard essay format with paragraphs.					
2. Must list (in resume style) recent participation in community service, volunteer work on campus					
or in the community, or campus involvement such as clubs, etc.					
NOTE: It is important for applicants to know that the scholarship winner's name will be					
announced publicly and published on social media.					
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:					
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		Financi		Diego Miramar College cholarship Services Office, K1-312	
Your application must be received by the		10440 Black Mountain Road			
Financial Aid & Scholarship Services Office by January 8, 2021		San Diego, CA 92126			
		Phone: (619) 388-7864			

INSTRUCTIONS:

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

Fax: (619) 388-7910

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.



SCHOLARSHIP "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.

All 2021 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 statement 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:			

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