Cerritos Community College – Financial Aid Office
General Scholarship Application

The purpose of the scholarship program at Cerritos College is to reward excellence, encourage academic achievement, and promote service to the college and community by giving honor, recognition, and financial support to our deserving students.

**Eligibility Requirements:**

- Must be enrolled at Cerritos College
- Must have at least a 2.0 GPA

**Application Procedures**

- Must complete and submit this application form in its entirety. Answer each question carefully and write N/A in spaces that do not apply.
- Must submit 2 letters of recommendation – Letters may be from instructor, counselor, employer, etc.
- Must submit an autobiography – Autobiography should tell the Scholarship Committee about you and your family as well as your educational and career goals. This important part of your package should be no more than one page.

**Deadline:** Return this form and the other required materials to the Financial Aid Office as soon as possible. Applications will be considered for the current academic year (Fall, Spring, Summer) for general scholarships. You must reapply every academic year to be considered.

**Selection Procedure:** Selection for individual scholarships may be based on academic achievement, letters of recommendation, financial need, and information contained in your autobiography. Whether you are selected or not, you will be notified by mail.

**Important Note:** If you are applying for a specific scholarship using this general application, eligibility requirements and deadline dates will be specific to that scholarship and you should list the name of that scholarship on this application.

Return the completed application package to the Financial Aid Office in person or drop-box.
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General Scholarship Application

Student # ___________________ Scholarship Applying for: _________________________

Last Name: ___________________ First Name: ___________________ Middle: ____

Home Address: __________________________
City: _________________________ State: _______ Zip: _____________

Home Phone Number: _________________ Cell Phone Number: ________________
E-mail Address: _________________________________

Citizenship Status:  ❑ U.S. Citizen ❑ Permanent Resident
❑ International Student ❑ Other _____________

High School Graduate:  ❑ Yes __________________________  ❑ No
   Name of High School

Circle One:       Freshman / Sophomore      Major: ________________________________

   Expected Date of Graduation: _____________

Do you have plans to transfer to a 4-year University?
❑ Yes __________________________  ❑ No
   Name of University

If yes, when do you plan to transfer?  ❑ Fall _____ ❑ Spring _____ ❑ Summer _____
   Year       Year       Year

Describe your career goals briefly:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
Extra-Curricular Activities:

_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Do any of the following apply to you?

☐ Athlete  ☐ Child of Cerritos College Staff/Faculty  ☐ Single Parent
☐ Veteran or Child of Veteran  ☐ Re-Entry Student

Ethnicity: ___________________________

Are you currently receiving financial aid?  ☐ Yes  ☐ No
If yes, please disregard the following.

Financial Information

<table>
<thead>
<tr>
<th>Financial Information</th>
<th>Student &amp; Spouse</th>
<th>Parents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income from Work</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Income from other source</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Income Last Year</td>
<td>$_______________</td>
<td>$________</td>
</tr>
</tbody>
</table>

*If income was from other sources, please indicate source of income:
_________________________________________________________________________
(Social Security, Unemployment, Child Support, Veterans Benefits, TANF, etc.)

Do you live with your parents?  ☐ Yes  ☐ No

Marital Status:  ☐ Single  ☐ Married  ☐ Separated/Divorced  ☐ Widowed

Household Size: _______ Number Attending College: ______

Describe your financial situation (include any hardship circumstances related to financing your education). Please state the amount you are requesting:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

I am requesting the Financial Aid Office review and evaluate eligibility for any scholarships that I may be eligible for. I have attached the required (2) letters of recommendation and autobiography.

Signature: ____________________________________ Date: __________________