## 2024 CCCSFAAA CONFERENCE SCHOLARSHIP

California Community Colleges Student Financial Aid Administrators Association **Application** 

PERSONAL INFO: (Please print)	School ID Numb	School ID Number	
Name:			
Street Address:			
City:	State:	Zip:	
Phone: ()	Email:		
Which community college are you attend	ding Spring 2024?	· · · · · · · · · · · · · · · · · · ·	
Educational Program:	Transfer Asso	ociate Degree Certificate	
Career objective(s):			
Current number of units for Spring 2024	enrollme <u>nt:</u>		
<ul><li>Educational and career</li><li>Why you have chosen t</li></ul>	and/or unusual hardship goals		
All Statements of Candidacy m double-spaced on white paper.		tronically completed and	
PERMISSION STATEMENT:			
If you are selected for a scholarship, do application or statement of candidacy fo		mission to use the information from you	
Yes No	Photograph/Picture attac	:hed	
Student Signature:		Date:	
Please return to:			
APPLICATION	DEADLINE IS:		