

MERRITT COLLEGE FACULTY SENATE SCHOLARSHIPS **APPLICATION FORM**

Please complete a separate application for each scholarship.

Instructions

It is the applicant's responsibility to ensure that all application documents are submitted together in one package by the deadline. The application package should be submitted via email to Danae Martinez at dlmartinez@peralta.edu by Friday, April 5, 2024, at 11:59 p.m.

Previous recipients of a Merritt College Faculty Senate scholarship may apply again, but priority will be given to applicants who have not received a Merritt College Faculty Senate scholarship. By submitting this application form, applicants grant Merritt College permission to publish their names in the College newsletter, social media, and website.

Please provide the following documents for each scholarship:

- 1. Application form
- 2. Recommendation form
- 3. Letter of recommendation from a Merritt College faculty member
- 4. Personal Statement

Со	mplete this	fillable form.		
1.	Name:	Last	First	Middle
2.	Student Id	entification Number:		
3.	Home Pho	ne:	Cell Phone:	
4.	E-mail add	ress:		
5.	Address:			
		Street		Unit #
		City	State	Zip Code

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6. Have you filed a petition for an AA/AS degree or a certificate?

If yes, please list the degree(s) or certificate(s):

7. Have you been accepted at an accredited four-year college or university? Yes

No

If yes, please list the college(s) and provide a copy of acceptance letter(s):

- 8. Number of cumulative units completed at **Merritt College**:
- 9. Cumulative grade point average (GPA) at all **Peralta Colleges**:
- 10. I am applying for the following scholarship/award: (*Check only one per application form.*)
 - Anita M. Black Scholarship in the Computer Sciences
 - Carola Thompson-Bowers Memorial Scholarship
 - Career Education (CE) Student Scholarship
 - Courage & Perseverance Award
 - Guy Forkner Award in Real Estate
 - John F. Summersette Award
 - Norbert Bischof Memorial Scholarship
 - Strong Start: First-Year Student Scholarship
 - William J. Love Community Social Services (COSER) Scholarship

I certify that all information I provided is accurate to the best of my knowledge and understand that my application will only be considered if I fulfill the eligibility requirements of the scholarship above.

Print Name:		
Signature:	Date:	