**PERSONAL INFO:** *(Please print)* School ID Number:*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Name:

Street Address:

City: State: Zip:

Phone: ( ) Email:

Which community college are you attending Spring 2019?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Educational Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Transfer Associate Degree Certificate

Career objective(s):

Current number of units for Spring 19 enrollment:

**STATEMENT OF CANDIDACY:**

On a separate sheet of paper, submit a statement explaining:

* + Any special circumstances and/or unusual hardship;
	+ Your educational and career goals;
	+ Why you have chosen these goals; and
	+ Any community involvement or leadership roles which you may have had.

***All Statements of Candidacy must be typed or electronically completed and double-spaced on white paper (2 page maximum, 12 pt font).***

**PERMISSION STATEMENT:**

If you are selected for a scholarship, do you give CCCSFAAA permission to use the information from your application or statement of candidacy for publicity purposes?

Yes No

Student Signature: Date:

Please return to:

Cañada College Financial Aid Office

Building 9-109 (first floor lobby)

# Yvonne

# APPLICATION DEADLINE IS: Monday, April 1, 2019 by 4:30 pm