2025 CCCSFAAA CONFERENCE SCHOLARSHIP

California Community Colleges Student Financial Aid Administrators Association

Application

PERSONAL INFO: (Please print)	School ID Num	School ID Number	
Name:			
Street Address:			
City:	State:	Zip:	
Phone: ()	Email:		
Which community college are you attending	ng Spring 2025?		
Educational Program:	Transfer Associate Degree Certificate		
Career objective(s):			
Current number of units for Spring 2025 e	nrollmont:		
On a separate sheet of paper, submit a state of Special circumstances an Educational and career go Why you have chosen the Any community involvements of Candidacy must double-spaced on white paper.	d/or unusual hardship pals ese goals ent or leadership roles v	which you may have had.	
PERMISSION STATEMENT:			
If you are selected for a scholarship, do yo application or statement of candidacy for p		ermission to use the information from your	
Yes No P	Photograph/Picture atta	iched	
Student Signature:	Date:		
Please return to:			
RETUR	RN to Financial Aid	Office:	

APPLICATION DEADLINE IS: January 6th, 2025 (Monday)

Completed/Signed Scholarship Application & typed Statement of Candidacy.