Department Scholarships & Grants Application Spring 2024

Please return by May 1, 2024 to the Citrus College Foundation Office location AD-131 or by email foundation@citruscollege.edu

Questions can be directed to the foundation office.

Name of Scholarship:		
First Name		Last Name
Address		
City		ZIP
Student ID		Phone Number
Current Overall Academic GPA		
Major or Planned Course of Study		
What is your student status? Please select one.		
New Student C	Continuing Student	Transferring Student
If you are a transferring student, what school will you attend in Fall Semester 2024?		
How many units are you enrolled in the Spring Semester 2024? Please select one. Full Time Student - 12 units and above Part Time Student - 12 units and below		

Are you eligible for the following student services, aid or programs? Select at least one.

EOP&S CalWORKS Board of Governors Fee Waiver (BOGW) Pell or Cal Grants None of the Above / Not Sure

Please select all that applies:

I have financial need
I am a disabled student
I am an Administration of Justice student.
I am a Student Veteran
I am a STEM (Science, Technology, Engineering, Math) major
I am pursuing a career in Water Technology
I am pursuing a career in Teaching or Education
None of the Above

Have you participated in any campus activities and/or student clubs? Please list.

Have you volunteered or worked in any community, service or charitable organizations? Please list.

Please see below for writing prompts and complete 3 of the 4 questions. Limit your response to approximately 300 to 500 words. Applications without an essay will not be considered. You may attach a separate paper.

o What does empathy mean to you? In what ways do you strive to learn and show empathy in your life? How do you plan to use your education to grow in/show empathy?

o What is an important life lesson you've learned? Who or what helped you learn it? How are you different because of it in positive ways?

o Describe a time that you didn't get something that you really wanted. What do you take away from that experience?

o What are your academic and/or career goals and how will this scholarship help you achieve these goals?

I certify that all the information above is correct and true to the best of my knowledge I understand awards are made in conjunction with the Citrus College Office of Financial Aid If selected, I give authorization for the Citrus College Foundation to use my name and information to provmote and publizie the scholarship program

Student Signature and Date

For more information please contact the Citrus College Foundation foundation@citruscollege.edu www.citruscollege.edu/foundation (626) 914-8825