**LOS ANGELES HARBOR COLLEGE SCHOLARSHIP APPLICATION**

*ALL APPLICANTS MUST HAVE COMPLETED AT LEAST 30 UNITS AT LAHC WITH A GPA OF 3.0 OR BETTER*

**PERSONAL DATA:**

NAME: ___________________________________  ID #: ______________________________

LAST      FIRST

EMAIL ADDRESS: __________________________________________

ADDRESS: _______________________________  U.S. CITIZEN: YES _____ NO _____

CITY/STATE/ZIP: _______________________________  PHONE: _____ __________________

BIRTHDATE: _____/_____/_______  AGE: _____  PLACE OF BIRTH: __________________

ANTICIPATED GRADUATION DATE FROM L.A. HARBOR COLLEGE: _______________________

**EDUCATIONAL BACKGROUND:**

COLLEGE MAJOR: ______________________  UNITS COMPLETED: ______  GPA: ______

CURRENT UNITS: ______  CAREER OBJECTIVE: _________________________________

HIGH SCHOOL: _________________________  CITY: _______________________  GPA: ______

OTHER COLLEGES: ______________________  MAJOR: __________________________

**FINANCIAL DATA:**

APPROX. FAMILY INCOME: $_________  HOUSEHOLD SIZE: _____  LIVE WITH PARENTS? _____

HOW ARE YOU PROVIDING MONEY FOR YOUR CURRENT COLLEGE EXPENSES? ________________

________________________________________

LIST FAMILY MEMBERS, THEIR AGES AND RELATIONSHIP TO YOU: _________________________

________________________________________

LIST YOUR INVOLVEMENT IN STUDENT GOVERNMENT AND/OR CLUBS: _______________________

________________________________________

ARE YOU A MEMBER OF EXTENDED OPPORTUNITY PROGRAMS & SERVICES (EOP&S)? ______YES ______NO

ARE YOU RECEIVING ASSISTANCE FROM SPECIAL PROGRAMS & SERVICES (SPS)? ______YES ______NO

DO YOU HAVE CHILDREN IN THE CHILD DEVELOPMENT CENTER ON CAMPUS? ______YES ______NO

**REFERENCES:** (DO NOT INCLUDE RELATIVES OR FELLOW STUDENTS)

NAME: ____________________________  NAME: ____________________________

ADDRESS: ____________________________  ADDRESS: ____________________________

PHONE: ____________________________  PHONE: ____________________________

RELATIONSHIP: ____________________________  RELATIONSHIP: ____________________________

OPTIONAL – You may attach one letter of reference.

CONTINUED ON THE BACK
LIST ANY ADDITIONAL INFORMATION INCLUDING:
1. LEADERSHIP EXPERIENCE
2. EXAMPLES OF PERSONAL RESPONSIBILITY IN ACTIVITIES OR WORK OUTSIDE THE COLLEGE.
3. EVIDENCE OF COMMITMENT TO THE COLLEGE.
(ATTACH ADDITIONAL SHEET IF NECESSARY).

I give the Scholarship Committee the right to distribute copies of this application to other agencies for the purpose of determining scholarship eligibility.

APPLICANT’S SIGNATURE: ________________________________  DATE: ________________

FOR OFFICE USE