

Additional Resources

➤ **Cabrillo College General Scholarships**

Scholarships are available to nursing majors through Cabrillo College General Scholarships. Request an application from the Financial Aid & Scholarships Office, or visit us online at: <http://www.cabrillo.edu/services/finaid/>

➤ **Community & Private Organization Scholarships**

Throughout the academic year, many private organizations send scholarship information and applications to the Cabrillo College Financial Aid & Scholarships Office. Criteria can range from college major to ethnic origin to financial need. Information, deadline dates and applications are available at the Financial Aid & Scholarships Office.

➤ **Internet Resources**

Cabrillo College Web Site

<http://www.cabrillo.edu/services/finaid/>

Scholarship Search

<http://www.schoolsoup.com/scholarships/>

Peterson's Education Center

<http://www.petersons.com/finaid/>

Minority Nurse Scholarships

<http://www.minoritynurse.com/financial/scholarships.html>

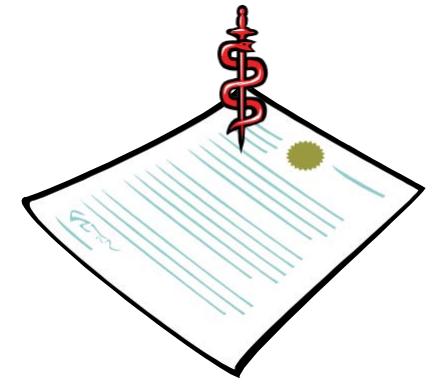


**CABRILLO COLLEGE
FINANCIAL AID &
SCHOLARSHIPS**

6500 SOQUEL DRIVE
APTOS, CA 95003
(831) 479-6415

Cabrillo College

201 Nursing Scholarships



Financial Aid & Scholarships
Office

6500 Soquel Drive
Building 100
Aptos, CA 95003
(831) 479-6415

Nursing Scholarships

Are you currently enrolled in the Cabrillo College? Nursing Program. If so, did you know...?

- Cabrillo College's Nursing Program has one of the largest scholarship amounts to award among Cabrillo's academic programs?
- If you think you are eligible, do not hesitate and apply!

This **single application** places you in consideration for **multiple Nursing scholarships** generated through the Cabrillo College Foundation. Scholarships available include both need-based and merit-based awards.

Eligibility

To apply, you must:

- Be currently enrolled in the Cabrillo College Nursing Program.
- Have a cumulative GPA of 2.5 or higher for all Cabrillo College coursework.

Application Instructions

Applicants must submit the following documents **with name and student ID or social security number** on each document to the Cabrillo College Financial Aid & Scholarships Office by **Friday, March 15, 2014**.

1. The enclosed **Nursing Scholarship Application Form**.
2. **Student Statement:** Attach a **ONE page** statement balancing a discussion of your past experience with an explanation of how these experiences have influenced your academic objectives, future goals, and aspirations. You must include the following:
 - *What has shaped you as a person?*
 - *What inspired you to pursue Nursing as a profession?*
 - *What are your educational & career goals?*
 - *How do you envision making a contribution to your community after you complete training?*
3. **Two Letters of Recommendation:** Please submit a **ONE page** letter of recommendation written by someone who is familiar with your academic progress, future goals and any extenuating personal circumstances. Make sure your name and social security number are included in your recommendation. The letter must be **TYPED or printed in BLACK INK**.
4. **Transcripts:** Scholarships are based on your Cabrillo College academic history. **Do not submit Cabrillo College transcripts.** Cabrillo College transcripts will be accessed by the Financial Aid & Scholarships Office. If you have completed coursework at another college, you will need to include those transcripts. Transcripts from other colleges need not be official.

TYPE or PRINT in **BLACK INK**.

A neat and timely application is a reflection of you.

PROOFREAD before submitting.

Deadline

Submit complete application packet to:

Cabrillo College
Financial Aid & Scholarships
6500 Soquel Drive
Aptos, CA 95003

by **Friday, March 15, 2014**

A complete application packet includes:

- ☑ Scholarship application
- ☑ **ONE page** Student Statement
- ☑ **Two** letters of recommendation
- ☑ **Transcripts** (see "Application Instructions" #4)

Late or incomplete applications will NOT be accepted.

Selection of Recipients

Applications will be reviewed in the spring 2014 semester. Cabrillo College Nursing Scholarship recipients are chosen by a panel of Cabrillo College Nursing faculty members.

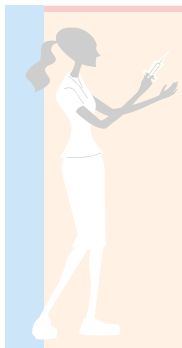
Recipient Status

Applicants will be notified by mail of their recipient status in **June 2014**.

Payment of Scholarships

Enrollment in the Cabrillo College Nursing Program is a condition of receipt for each Nursing Scholarship award. Enrollment status will be verified by the Financial Aid & Scholarships Office and the Cabrillo College Nursing Program before awards are disbursed through Cabrillo Access Card and Higher One. Scholarship funds will be posted to recipients account before the Fall 2014. Recipients **must** also submit a thank you letter to the donor of the scholarship.





Cabrillo College

201+ Nursing Scholarships Application

Cabrillo College Nursing Scholarships are awarded to selected students who show scholastic achievement, promise for professional advancement, and the ability to contribute to the Nursing profession and the community. This application places you in consideration for multiple Nursing scholarships generated through the Cabrillo College Foundation. **To be eligible applicants must:**

- **6 Y enrolled in the Nursing Program for Spring 201+**
- **Have a cumulative GPA of 2.5 or higher for all Cabrillo College coursework**

CLEARLY TYPE OR PRINT IN BLACK INK ONLY
Include your name and social security number on each page. **Submit application to the Cabrillo College Financial Aid & Scholarships Office by 5pm Friday, March 25, 201+**

Applicant Information

Full Name: _____ Student ID: _____
Last First M.I.

Address: _____
Street City State Zip Code

Phone: _____ Date of Birth: _____

Email Address: _____ Social Security #: _____

Marital Status: _____ Do you have dependent children? Yes No
 F M Ages: _____

Ethnic Origin: _____ Gender Identify:

Check all that apply: Minor in Child Development Minor in English Poetry Graduate of Watsonville High School Re Entry Student Resident of Salinas Valley Hospital District for at least 1 year

Education

Are you a citizen of the United States? Yes No

High School: _____

City/State/Country: _____ Did you graduate? Yes No

Colleges Attended: _____

Did you/will you graduate? Yes No Degree(s) & Major(s): AA BA MA in: _____

Will You Transfer? Yes No Transferring to: _____ When will you transfer? Fall 20 _____ Spring 20 _____

Degree Objective: AA BA MA **Professional/Doctorate (check all that apply)**

LVN for 1 year or more? Yes No

Which languages are you fluent in? _____

Are you the first generation of your family to attend college? Yes No

Student Financial Information

Have you submitted a Free Application for Federal Student Aid (FAFSA) for the 2016-2017 School Year? Yes No If yes, did you list the Cabrillo College Federal School Code on your FAFSA? Yes No

Student & Spouse 2016 Total Earned Annual \$ _____ Student & Spouse Projected 2016 Annual Earned Income: \$ _____

Student's Place of Employment: _____ Hours Worked per week: _____

Additional Income Amount & Sources: \$ _____

Additional Information to consider when assessing financial need: _____

For Office Use Only:

Enrolled in/Accepted to Program _____ GPA _____ Strong Financial Need _____

Parent(s) Marital Status: _____	Number of Dependent Children & Ages: _____					
Number in Household attending college at least half time (6 units) Fall 2016: _____	Was the applicant claimed as a Dependent on 2016 Federal Tax Return?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Will the applicant be claimed as a Dependent on 2016 Federal Tax Return?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Parent(s) 2016 Annual Earned Income: \$ _____	Parent(s) Projected 2016 Annual Earned Income: \$ _____					
Additional Information to consider when assessing financial need:						

Academic/Community Honors & Recognition		
Award/Recognition	Given by	Date Received

Employment, Extracurricular Activities & Community Involvement	
Activity	Date(s) of Participation

Disclaimer & Signature	
<p>I/We certify that my answers are true and complete to the best of my/our knowledge. I/We also authorize the Cabrillo College Scholarships Office to release the information in this application to the Scholarship Review Committee and any other organization or its representatives to determine eligibility. The data contained herein shall remain confidential. If this application leads to an award, I understand that false or misleading information in my application or interview may result in my disqualification. I also understand that enrollment in the Cabrillo College Nursing Program is a condition of receipt for any scholarship resulting from this application. I understand that if selected as a recipient, my name and likeness may be used in publicity regarding the scholarship.</p>	
Parent Signature: _____ (Dependent Students Only)	Date: _____

Submit Completed Application-including:
 Application
 One Page Student Statement
 Two Letters of Recommendation
 Transcripts from other colleges need not be official. to

Cabrillo College
Financial Aid & Scholarships
Office
6500 Soquel Drive
Aptos, CA 95003