Margarita Carrillo has been a Cabrillo College Trustee since February 2012 and represents Area V. Margarita established the Placida Alvarez de Carrillo Endowed Scholarship in honor of her mother who never had the opportunity to go to school. Placida sacrificed so much for her children and encouraged all of her children to maximize their potential, including, but not limited to going on to get a college education. Margarita hopes the scholarship can serve as a lifeline for students to help them achieve their educational goals. Eligible students must be studying in the STEM fields and be the first in their family to attend college.

Application Checklist
A complete Scholarship Application must include:
- Signed Scholarship Application plus
- Student Essay (1,500 words or less)

The essay must include the following:
1. As a first generation college student, explain how pursuing higher education will transform your life and how you plan to use that transformation to help others in a positive way.
2. What STEM field most intrigues you?
3. How will you contribute to the STEM field?
4. Why is this scholarship important to helping you attain your goal for higher education?

All documents must be submitted by 12:00 p.m., Friday, March 25, 2016.
Incomplete or late applications will not be accepted.

Submit to:
Cabrillo College
Financial Aid & Scholarships Office
6500 Soquel Drive, Building 100
Aptos, CA 95003

For Office Use Only:  Incomplete ____________________________  Not eligible ____________________________
## Employment, Extracurricular Activities & Community Involvement

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<tr>
<th>Activity</th>
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## Academic/Community Honors & Recognition

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### Disclaimer & Signature

I/We certify that my answers are true and complete to the best of my/our knowledge. 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/We also authorize the Cabrillo College Financial Aid & 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. I understand that if selected as a recipient, my name and likeness may be used in publicity regarding the scholarship.

Student Signature: ___________________________ Date: _______________

Parent Signature: ___________________________ Date: _______________

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