

**APPLICATION FOR ALUMNI SCHOLARSHIP**

Name \_\_\_\_\_ Student ID# \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_ County \_\_\_\_\_

\_\_\_\_\_ Date of Birth \_\_\_\_\_

E-mail Address \_\_\_\_\_

Full-Time \_\_\_\_\_ or Part-Time \_\_\_\_\_ College GPA \_\_\_\_\_

High School \_\_\_\_\_

Anticipated Date of Graduation from CCM \_\_\_\_\_ Major \_\_\_\_\_

Post-Graduation Plans \_\_\_\_\_

Career Goals \_\_\_\_\_

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Awards/Recognition (Scholarships, Dean's List) Include Dates

\_\_\_\_\_  
\_\_\_\_\_

Community Activities Include Dates

\_\_\_\_\_  
\_\_\_\_\_

CCM Activities Include Dates, Name of Organization or Team, Position Held

\_\_\_\_\_  
\_\_\_\_\_

Is One or Both Parents or Grandparents a CCM Graduate? If Yes:

(Parent/Grandparent) Current Name \_\_\_\_\_

Last Name at Graduation \_\_\_\_\_ Date of Graduation from CCM \_\_\_\_\_

Additional Information (Spouse, Family, Other Education or Training, Employment)

\_\_\_\_\_  
\_\_\_\_\_

**Do you receive any financial aid/scholarships/or tuition reimbursement? Yes \_\_\_ No \_\_\_**