NASSAU COMMUNITY COLLEGE
ONE EDUCATION DRIVE
GARDEN CITY, NEW YORK 11530-6793
ACADEMIC SENATE SCHOLARSHIP and STUDENT AID COMMITTEE

STUDENT APPLICATION
FOR
RICHARD M. HOELDERLIN SCHOLARSHIP

In order to qualify for this scholarship all of the following information must be provided. Failure to do so will result in disqualification of your application.

A. PERSONAL DATA:
   Please ensure that the information below is accurate as it will be used to notify the awardees.
   1. Mr. / Mrs. / Ms. __________________________________________________________
      (Circle One) FIRST NAME       MIDDLE INITIAL       LAST NAME
   2. HOME ADDRESS_________________________________________________________
      STREET             CITY             STATE             ZIP
   3. TELEPHONE # (______)___________________________________________________
   4. BANNER NUMBER - N __________________________________________________
   5. AREA OF CONCENTRATION – MAJOR COURSE OF STUDY ___________________
   6. NUMBER OF CREDITS CURRENTLY ENROLLED IN AT NCC _________________
   7. NUMBER OF CREDITS ALREADY COMPLETED TO DATE AT NCC___________
   8. CUMULATIVE GRADE POINT AVERAGE AT NCC___________________________
   9. EXPECTED DATE OF GRADUATION ________________ OR UNKNOWN ________

B. ESSAY STATEMENT: Please submit a typed essay describing your educational and personal accomplishments and your career goals. Remember this is a scholarship application; spelling and grammar are important. Be sure that the essay is clear and concise. The format is 1-2 pages, double-spaced, 12-point Times New Roman font and one-inch margins.
I AFFIRM THAT THE INFORMATION SUBMITTED ON THIS FORM IS COMPLETE AND ALL ATTACHMENTS ARE ACCURATE, TO THE BEST OF MY KNOWLEDGE.

SIGNATURE_____________________________________________________

PLEASE BE ADVISED THAT ALL INFORMATION ENTERED ON YOUR APPLICATION FORM MUST BE LEGIBLY WRITTEN OR TYPED, AND ALL OF THE FOLLOWING MUST BE INCLUDED:

- YOUR TYPED ESSAY
- A COPY OF YOUR REGISTRATION OR BURSAR’S RECEIPT FOR THE CURRENT SEMESTER
- A COPY OF YOUR MOST RECENT NCC TRANSCRIPT
- A SELF-ADDRESSED STAMPED ENVELOPE (USE APPROPRIATE POSTAGE)
- SIGNED APPLICATION

NOTE: FAILURE TO INCLUDE ANY OF THE ABOVE WILL RESULT IN DISQUALIFICATION OF YOUR APPLICATION.

SUBMIT YOUR COMPLETED APPLICATION TO THE NASSAU COMMUNITY COLLEGE FINANCIAL AID OFFICE (TOWER BUILDING, 3RD FLOOR).

IS THE APPLICATION COMPLETE?      YES __________  NO __________

PLease list missing items ___________________________________________________________

DOES THIS APPLICATION MEET DONOR CRITERIA?  YES __________  NO __________

IF NOT, WHY? ___________________________________________________________________

REviewer’s Comments:

A. INITIALS __________  DATE __________  RATING __________
   Comments _________________________________________________________________

B. INITIALS __________  DATE __________  RATING __________
   Comments _________________________________________________________________

C. INITIALS __________  DATE __________  RATING __________
   Comments _________________________________________________________________