

# Lassen Community College

## Dr. Victor Sainte-Marie Memorial Scholarship

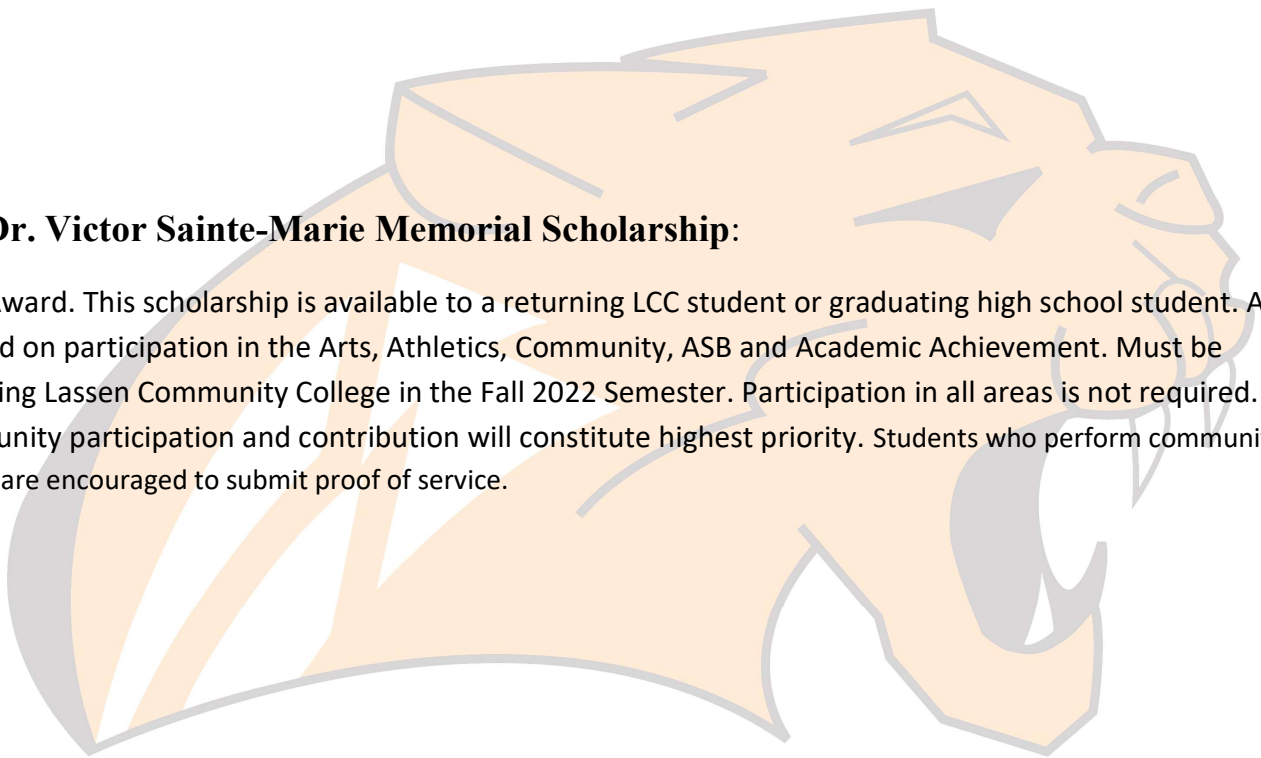
### Application

**THE SCHOLARSHIP APPLICATION ATTACHED IS TO BE USED UNLESS OTHERWISE NOTED AND IS DUE IN THE FINANCIAL AID OFFICE BY Friday, APRIL 22, 2022 AT 4:30PM**

**LATE AND/OR INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**

#### **Dr. Victor Sainte-Marie Memorial Scholarship:**

\$500 Award. This scholarship is available to a returning LCC student or graduating high school student. Award is based on participation in the Arts, Athletics, Community, ASB and Academic Achievement. Must be attending Lassen Community College in the Fall 2022 Semester. Participation in all areas is not required. Community participation and contribution will constitute highest priority. Students who perform community service are encouraged to submit proof of service.



You are applying for a scholarship provided by a Lassen Community College organization or other organizations from the community. Submit your **complete** application form, Statement of Educational Purpose, and three Recommendation Forms to the Financial Aid Office by **APRIL 22, 2022**. In your Statement of Educational Purpose explain why you should receive the scholarship for which you are applying. Please keep the statement brief, no more than two typed pages double-spaced. The statement should include all information you feel will help us make a decision such as long range goals, employment, community service, service organizations, athletics and educational plans.

DO NOT INCLUDE ANY REFERENCE TO AGE, SEX, OR RACE (Unless applicable to the scholarship for which you are applying)

**NAME** \_\_\_\_\_

**STUDENT I.D. #** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**TELEPHONE** \_\_\_\_\_ **GPA** \_\_\_\_\_

What school are you attending next year? \_\_\_\_\_

What field of study are you pursuing? \_\_\_\_\_

What date will you complete your AA/AS? \_\_\_\_\_ BA/BS? \_\_\_\_\_

Have you applied for Federal Financial Aid for 2022/2023? YES \_\_\_\_\_ NO \_\_\_\_\_

LIST ANY ACADEMIC / PERSONAL / ATHLETIC HONORS WON

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

**Release of Information Statement: (Must check one)**

\_\_\_\_ I authorize Lassen Community College to release my name to the local press and at the Annual Awards Ceremony should I be the recipient of one or more of the scholarships or awards I have applied for on this application.

\_\_\_\_ I **DO NOT** authorize Lassen Community College to release my name to the local press and at the Annual Awards Ceremony should I be the recipient of one or more of the scholarships or awards I have applied for on this application.

In addition, I give the screening committee permission to review my academic records.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



# LASSEN COMMUNITY COLLEGE

## SCHOLARSHIP

### RECOMMENDATION FORM

STUDENT'S  
NAME \_\_\_\_\_

LAST

FIRST

MIDDLE

Student ID Number \_\_\_\_\_ TELEPHONE \_\_\_\_\_

Check how you would rate this applicant's academic skills:

	<b>OUTSTANDING</b>	<b>ABOVE AVERAGE</b>	<b>AVERAGE</b>	<b>NEEDS IMPROVEMENT</b>
1. Academic Achievement				
2. Academic Potential				

Check how you would rate this applicant's characteristics:

	<b>STRONGLY AGREE</b>	<b>AGREE</b>	<b>SOMEWHAT DISAGREE</b>	<b>DISAGREE</b>
1. Has Positive Self Image				
2. Demonstrates Leadership				
3. Is a Self Starter				
4. Is Motivated				
5. Has Potential for Growth				

Comments: \_\_\_\_\_

Form Completed By:

Name \_\_\_\_\_ Position \_\_\_\_\_

School/Organization \_\_\_\_\_ Telephone \_\_\_\_\_

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## SCHOLARSHIP

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Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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