BROOME COMMUNITY COLLEGE FOUNDATION, INC.

Southern New York Branch

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN

AAUW Scholarship for Women

Dear BCC Student:

The Southern New York Branch of the **American Association of University Women** plans to offer a scholarship to a **woman attending BCC who is considered to be a non-traditional student.**

We define a non-traditional student as a person who is working toward an academic goal later in life than the traditional student. This person has more commitments and greater responsibilities than the typical college student.

Selection criteria for applicants include:

- Female student who fits the description of a non-traditional student as stated above;
- Has completed a min of 12 cum credits and is continuing at BCC in the Fall;
- Demonstrates financial need (must have FAFSA form on file, in the Financial Aid Office);
- Resides in Broome or Tioga County;
- Submits a completed application that includes an **Autobiographical Summary and Consent to Release Information Form.**

If you plan to apply for this scholarship, please be certain that you are on record as having applied for financial aid with a FAFSA form at the BCC Financial Aid Office.

Application Deadline: February 14th at 4:30 p.m.
in the BCC Foundation Office, Wales Bldg., W-201

For details call 778-5047 or email: Foundation@sunybroome.edu

BROOME COMMUNITY COLLEGE FOUNDATION, INC.

Southern New York Branch

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN

AAUW Award for a Non-traditional Female Student

APPLICATION

NAME: _____ DATE: _____

ADDRESS: _____

_____

STUDENT ID (B#): _____

PHONE # _____CELL# _____EMAIL: _____

HIGH SCHOOL ATTENDED _____

COLLEGE PRESENTLY ATTENDING _____

CUMULATIVE GPA _____ CUM. CREDITS _____

COURSE OF STUDY _____

DEGREE THAT YOU WILL RECEIVE _____

DATE OF ANTICIPATED GRADUATION _____

Please include the following in a summary statement on a separate sheet of paper and limit your statement to 500 words or less.
Include: Title - "Why This Award is Important to Me".

- Family history: marital status, number of dependents
- Education background
- Education goals – short and long term
- Career goals
- Any special conditions or factors affecting your educational pursuits

All biographical information will be kept confidential.

Return completed application to Wales Bldg. 201 no later than February 14th 4:30 p.m.

BROOME COMMUNITY COLLEGE FOUNDATION, INC.
Southern New York Branch
AMERICAN ASSOC. OF UNIVERSITY WOMEN SCHOLARSHIP

Consent to Release Information

I, _____, give Broome Community College, and the AAUW Scholarship Screening Committee permission to exchange information connected with my application for the above scholarship.
By signing this consent, I understand that as an applicant for this scholarship award I give Broome Community College permission to verify submitted materials including financial aid information, personal financial information, personal data and personal reference. I understand that all information will be kept confidential.
I understand that this consent form will remain in effect as long as my eligibility exists.

*Note: **You must sign in front of a staff member of the BCC Foundation, 201 Wales Bldg**. or a Notary Public. **BRING PHOTO ID**

Student's signature _____ Date _____

*Signature of Foundation staff member _____

Date _____

Certification Form

I believe myself eligible for and hereby make application to receive an AAUW Scholarship Award at Broome Community College. I certify that all statements made in this application are complete and accurate.
I understand that:

- Falsification in my application, transcripts or other attachments will disqualify my application;
- A Selection Committee will select scholarship recipients and that the Committee's decision will be final;
- Incomplete applications will not be considered; and
- It is my responsibility to inform the Financial Aid Office of any change in my eligibility status or of any additional awards received.

Signature _____ Date _____

_____
(Please print your name)