BROOME COMMUNITY COLLEGE FOUNDATION, INC., through funding provided by American Legion NE Post #1645, presents:

\$1,000 Scholarships for BCC full-time Business Majors

2014 Application

Selection Criteria: Student must

- Attend BCC full-time (12 or more credits) and maintain a 2.2 GPA;
- Be at least 24 years of age (birth date on or before 08-01-89);
- Be a U.S. Citizen and a Broome County resident;
- Financial need preferred;
- Be motivated to pursue an Associate's Degree to completion.

Applicant's Name:

Address:

City:

Bayes State:

City:

Major:

Date of Birth:

Telephone: (Home)

Place of Birth:

(If outside the USA, proof of US citizenship is required)

Application Includes: Student Summary Sheet, Personal Reference Form, & Consent Form.

Return Completed Application
On-Campus to:
Wales Administration Bldg., W201, Foundation Office

DEADLINE: February 14, 2014 at 4:30p.m.

Contact us at: (607) 778-5047 or email: foundation@sunybroome.edu BCC Foundation Inc. PO Box 1017 Binghamton, NY 13902

BROOME COMMUNITY COLLEGE FOUNDATION, INC.

American Legion North-east Post 1645 American Legion Scholarships

Applicant's Autobiographical Summary

The North-east Post 1645 American Legion Scholarships were established to assist "non-traditional" students to obtain an Associate's Degree in a Business Major.

"Non-traditional" refers to any student working toward an academic goal later in life than the "traditional" student who attends college directly from high school. This student generally has more commitments and greater responsibilities than the typical college student.

SUMMARY INSTRUCTIONS: Write a brief (less than 500 words) summary about yourself on a separate sheet of paper-include the information listed below. Type or print clearly. Sign and date your paper.

Summary title: "Why this scholarship is important to me as a non-traditional student." Suggested information to include:

• Family history:

Marital status Number of dependents

- Educational background
- Educational goals: Short-term goal Long-term goal
- Career goals
- Include any past or current involvement as a volunteer or helper in your community
- Other pertinent information, if applicable: Special circumstances related to financial status, learning or physical challenges, etc.

All biographical information reviewed by the Selection Committee will be considered confidential in nature.

BROOME COMMUNITY COLLEGE FOUNDATION, INC.

North-east Post 1645 American Legion Scholarships

Personal Reference Form

Student Applicant's Name:		
Reference Name (Print):	Phone #	
in a college-level business major and earn an Associa	ify individuals who possess the greatest potential and motivation ate's Degree. Please print clearly in black ink or type your line: Friday February 14, 2014 at 4:30 in W-201, BCC Camp th any questions. Please include:	
• Why you think this person is deserving of this awar	rd;	
• Your relationship to the applicant;		
• Your evaluation of the applicant's strengths and we	eaknesses;	
• Other pertinent information.		
Reference Signature:	Date:	

(Attach another sheet, if needed)

BROOME COMMUNITY COLLEGE FOUNDATION, INC.

American Legion North-east Post 1645 Scholarships

Consent to Release Information

I,		
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.		
You must sign below in front of a staff member of the BCC Foundation, W-201 Wales Administration Bldg. (or a Notary Public)		
BRING PHOTO ID		
Student's signature Date		
Signature of Foundation staff member: Date (or Notary Public)		
Certification Form		
I believe myself eligible for and hereby make application to receive a North-east Post 1645 American Legion Scholarship Award a 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)