BROOME COMMUNITY COLLEGE FOUNDATION



Announces the 2013-2014 Baccalaureate Scholarship

Attention BCC Students:

The Foundation is pleased to announce this scholarship, which is an endowment by a community friend. The winner will be selected from applications submitted by the February 14th deadline. For full consideration, applications should be typed or printed neatly. Awards will be announced in April and winners will be recognized at the Foundation's Scholarship Reception in May. All recipients are urged to attend the reception and ceremony.

Requirements:

- Student must be a graduating senior and transferring to a 4-year college in Fall 2014;
- Student must be full-time with financial need (have FAFSA on file and be determined to have need by the BCC Financial Aid Office);
- Student must be completing an Associates Degree;
- Student must show potential for successfully completing their 4-year degree.

If you meet the criteria and would like to apply for this award, please complete the application and provide all information requested.

Application Deadline: Friday, February 14th at 4:30 p.m.

in

BCC Foundation Office on Campus: Wales Building, W-201

607-778-5047

e-mail: Foundation@sunybroome.edu

BROOME COMMUNITY COLLEGE FOUNDATION

2013-2014 BACCALAUREATE SCHOLARSHIP APPLICATION

Student			
Name:			
Address:			
Major:	Credits completed: _	Cum. GPA:	_
Student ID (B#):	Gradu	nation date:	_
Phone #:	E-mail address:		
What 4-year school do	you plan to transfer to? _		
Planned Major			
Please fully answer the	following questions on a	separate sheet. Print o	r Type
Describe your academ Kappa, Dean's List, co	,	any honors you have	received, (e.g. Phi Theta
List the name and pho comment on your wor	one number of a BCC Fak:	nculty Member you ha	ave had who can
Describe your extra-cu semester you spend on	urricular activities while n this activity.	e at BCC. Indicate ho	w much time each
What are your future	education and career go	pals?	
Signatu	re		

BROOME COMMUNITY COLLEGE FOUNDATION

Baccalaureate Scholarship

Consent to Release Information

Ι,	, give Broome Community College, and the
(Please print your name above)	, give Broome Community College, and the
Baccalaureate Scholarship Screening Coapplication for the above scholarship.	ommittee permission to exchange information connected with my
Community College permission to verify	at as an applicant for this scholarship award I give Broome y submitted materials including financial aid information, data and personal reference. I understand that all information
I understand that this consent form will a	remain in effect as long as my eligibility exists.
*NOTE: You must sign below in front or a Notary Public.	of a staff member of the BCC Foundation, 201 Wales Bldg.
·	BRING PHOTO ID
Student's signature	Date
* Foundation staff member signature	Date
	Certification Form
	make application to receive a Baccalaureate Scholarship Award at hat all statements made in this application are complete and
I understand that:	
 A Selection Committee will select sefinal; Incomplete applications will not be 	scripts or other attachments will disqualify my application; cholarship recipients and that the Committee's decision will be considered; and Financial Aid Office of any change in my eligibility status or of
Signature	Date
(Please print your name)	