NAME OF SCHOLARSHIP

INSERT SEMESTER/YEAR

DEADLINE: Insert Day, Time and Year

SCHOLARSHIP REQUIREMENTS: Please submit the following required documents:							
☐ TYPED Scholarship Application (see application below)							
 Personal Statement - One (1) page, 12 pt. font, double-spaced Discuss your academic achievements, financial need and leadership abilities within CSULB or the community (insert the questions you want students to write about for this scholarship-these are just samples and you do not have to use these listed). 							
 Insert Scholarship Name (\$500/Insert Scholarship Amount) Must be a member of the (insert name of club) or Must be a currently enrolled Must be a full-time or part-time student Must have at least a cumulative (insert GPA-if you are requiring a GPA) Insert other criteria you would like for this scholarship 							
2015-2016 SCHOLARSHIP APPLICATION							
Please TYPE application Student ID Number:							
Siddeni ib Nomber:							
First Name			Last Name				
Address:							
City:			State:		Zip:		
Home Phone:	Cell Phone:						
E-mail:							
Academic Standing:	Freshman		Sophomore		Junior		
	Junior		Senior		Graduate Student		
Major or Graduate Program:							
Number of Units Currently Enrolled:			Cumulative GPA:				
			I				
Siana			Date				

SUBMIT COMPLETED APPLICATION TO (INSERT NAME, EMAIL OR LOCATION TO SUBMIT APPLICATION)