



SOUTH HIGH ALUMNI ASSOCIATION
Scholarship Application
2019 – 2020

Submission Deadline: March 1, 2019

Read this application completely.

South High Alumni Association has a limited number of private scholarships for Salt Lake Community College, which are based on a combination of need and merit.

Awards consist of **half tuition** per academic year, based on in-state residency. A minimum of nine course hours are required each semester. The South High Alumni Association Scholarship may be applied toward tuition and/or student fees only.

The scholarship is effective for Fall 2019 and Spring 2020.

Requirements:

1. Agree to be a degree or certificate-seeking student at Salt Lake Community College.
2. Intend to register for at least 9 credit hours in an eligible program.
3. Have at least a 2.5 grade point average if a graduating high school senior or a continuing/transfer college student.
4. Be a South High School alumnus or a direct descendant of a South High alumnus. Spouses of direct descendants are also eligible to apply.
5. Be a U.S. citizen or legal resident, and a resident of Utah.

Applications are to be submitted with the following:

- This **completed form (including the essay questions as described on the next page)**
- At least two** completed recommendation forms or letters from people, other than family, with direct knowledge of your abilities, accomplishments, and potential. Make sure each form/letter is signed.
- Official transcript** (not a computer print-out) from your high school or college. This must reflect your *most recent* schooling. ***We must have at least one full year's records and something from your 12th grade year or beyond.***

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

Mail the completed application, your transcript, and two completed recommendation forms postmarked no later than **March 1, 2019** to:

South High Alumni Association
Salt Lake Community College
1575 South State Street
Salt Lake City, Utah 84115

Hand delivered applications will not be accepted.

If you have questions about this application, email **SHAAupdates@gmail.com**.

Do NOT give this application to the SLCC Financial Aid Office!

Applications turned in to any SLCC office will not be considered!

PERSONAL INFORMATION (Please print):

Office Use Only

Name _____
 Last First Middle

Mailing Address: _____

City, ST Zip _____

Phone(s) _____

Email _____

South High Alumnus Relationship – e.g. parent, grandparent, etc. (You **MUST** include the name of a South High alumnus [include maiden name, if applicable], their relationship to you, and **their graduation or attendance dates**):

Students who have received the SHAA Scholarship in the past are not eligible for consideration.

ACADEMIC INFORMATION

Circle highest grade completed: 10 11 12 13 14 15 16 What year? _____

College Classification:

First time college student Continuing student at SLCC Transfer student

What is your major at SLCC? _____

How did you hear about the SHAA Scholarship? _____

ADDITIONAL REQUIRED INFORMATION

Each of the following questions is associated with a point value.

Answer ALL of them completely. Remember, this is our only picture of who you are and why you deserve consideration. On a separate sheet, answer the following questions (print or type).

1. **What are your education and career goals?** How will you have an impact in society?
2. **How do you plan to finance your education?** (Please explain any specific financial needs, challenges, or circumstances you think should be considered.)
3. **Other than financing your education, what has been your greatest challenge? How are you coping with these challenges?** (Such as: marriage status, children, divorced, disabilities, special needs, employment circumstance, etc.)
4. **Describe your activities and accomplishments in each of the following:**
 - Work Experience (include dates of employment, responsibilities, special projects, promotions, recognition, etc.)
 - Community/Extracurricular Activities
 - Other responsibilities, projects, or awards you feel are relevant

I hereby certify that, to the best of my knowledge, the information furnished in this application is accurate and complete.

Signature _____ Date _____

SOUTH HIGH ALUMNI ASSOCIATION Scholarship Recommendation Form

Deadline: March 1, 2019

Student: Please complete only the student section and give this form to an instructor, advisor, counselor, or someone with direct knowledge of your abilities, accomplishments, and potential. (This person may **not** be a relative.) Once complete, attach it to your scholarship application, and return by **March 1, 2019**.

Student Section: To be completed by the applicant. (Please type or print clearly):

Full Name: _____

Mailing Address: _____

City ST Zip _____

Evaluation Form: To be completed by the person providing the recommendation

6 = Outstanding

4 = Good

2 = Below Average

5 = Excellent

3 = Average

1 = No Knowledge

Recommendation:

	6	5	4	3	2	1	Comments (Recommended)
Self Motivation							
Commitment							
Responsibility							
Leadership							
Judgment							

Additional Comments: (We encourage you to tell us about this student. Use an additional sheet if you need more space.)

Name (please print): _____

Signature: _____ Date: _____

Position: _____ Phone: _____

Relationship to Applicant: (teacher, supervisor, etc.) _____

School/Organization: _____

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