



Osher Initiative for California Community College Students Scholarship Application

Thanks to the generosity of The Bernard Osher Foundation, thousands of California Community College students, like you, may receive an Osher Scholarship as part of the California Community Colleges Scholarship Endowment. Mr. Osher's vision is to "not only benefit the community college students of today but countless more for years to come."

Criteria

- Student attending fall 2010 and spring 2011 semesters must have completed 24 or more "degree applicable" semester units (or the equivalent) at the time of the initial scholarship disbursement.
- Student must be enrolled at least half-time (6 or more units) during all terms in which the award remains active.
- Student must be eligible for a CCC Board of Governor's Fee Waiver.
 - Students must complete 2010/11 FAFSA

**Return completed application to:
Barstow Community College Financial Aid Office
2700 Barstow Rd.
Barstow, CA 92311**

Application Deadline:

December 15, 2010 by 5:00 pm



CALIFORNIA
COMMUNITY COLLEGES
**SCHOLARSHIP
ENDOWMENT**
A PART OF THE OSHER INITIATIVE FOR
CALIFORNIA COMMUNITY COLLEGE STUDENTS



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Barstow Community College Students

Name: _____ Student ID Number: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Day Phone: _____ Evening Phone: _____
 Certificate Program, AA Degree/Major; or Transfer: _____
 Occupational or Educational Objective: _____
 Total Number of Units Completed: _____

1. Please write a statement detailing your educational and career goals including any special circumstances.

2. Describe any campus or outside activities, organizations, or community services you are involved with related to your educational or occupational objective.

3. Please list any High School/College or community awards and honors you have received:

4. Please describe work experiences and your current job, if applicable:

5. Please write a short paragraph describing what accomplishment you are most proud of at this point in your life and describe and explain any barriers or challenges you overcame to achieve the accomplishment.

Number of dependent children: _____ Ages of dependents: _____

I certify that the information I have provided on this application is true and complete to the best of my knowledge. I also understand that my application will not be considered unless my federal financial aid application and all supporting documentation is on file with the Barstow Community College Financial Aid Office no later than 5:00 pm, December 15, 2010.

Signature: _____ Date: _____