



**\$1,800.00 IN SCHOLARSHIPS!**

**Available  
From NCC Alumni Association**

**Three \$600 Awards**

**Graduating Students (May 2018)**

**Cumulative Average 3.0 Minimum Required**

**SUBMITTAL DEADLINE: Friday, March 9, 2018**

Applications available at  
Alumni Office - 353 Harmon Avenue  
Student Activities Center - CCB, Room 150  
Transfer Office, Nassau Hall  
The Library Reference Desk



**NASSAU COMMUNITY COLLEGE ALUMNI ASSOCIATION  
GRADUATING STUDENT SCHOLARSHIP AWARD**

**A complete application for scholarship consists of the following:**

1. Application form-printed or typed.
2. School activities.
3. Letters of reference (2)- no family members.
4. 200-word essay – typed double spaces.
5. Most recent N.C.C. transcript
6. Acceptance letter from the institution you will be attending

**Note:** Applications not accompanied by the appropriate forms, will be considered incomplete and will not be reviewed for awards.



Graduating Student Application

List school activities, leadership positions, and honors. Check the semesters in which these activities occurred.

Activities	1st sem.	2nd sem.	3rd sem.	4th sem.	Leadership Position/Honors

List community activities and/or past employment \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I hereby apply for a scholarship at Nassau Community College to supplement my financial resources toward my pursuit of higher education. I do hereby affirm that the information submitted on this form and any attachments thereto are accurate to the best of my knowledge. I also affirm my records are in good order and free of impounds.

Date: \_\_\_\_\_ Signature of Student \_\_\_\_\_

Return the completed application and attachments to Alumni Office, 353 Harmon Avenue, by **Friday, March 9, 2018.**



**NASSAU COMMUNITY COLLEGE ALUMNI ASSOCIATION  
GRADUATING STUDENT SCHOLARSHIP AWARD**

**Reference Form**

NAME: \_\_\_\_\_ STUDENT N # \_\_\_\_\_

Has applied for a NCC Alumni Association Scholarship and has listed you as a reference. Please complete this form and return it **to the applicant** in a sealed envelope in time for he/she to meet the application deadline of **March 9, 2018**. Please type or print in ink. Thank you.

6. How long have you known the applicant and in what capacity?

7. What is your assessment of the applicant's ability?

8. Why do you believe the applicant will be successful in the future?

9. Are there any unique factors that make the applicant especially worthy of receiving scholarship support?

10. If you care to comment further, please use the reverse side of this page.

Name \_\_\_\_\_ Position \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_