

S □□ □□□□ □□

Student's CCA ID Number



Continuing Student Academic Scholarship for 2009-2010

TERMS AND CONDITIONS OF GRANT

1. A merit-based scholarship of up to \$500 per semester will be offered to continuing students who qualify.
2. To be eligible, students must have completed at least 12 credit hours at CCA, must have a cumulative completion rate of at least 67%, and a cumulative GPA of 3.70 or better.
3. In order to receive the \$500 scholarship, students must be enrolled full time.
4. The scholarship will be awarded to students regardless of need.
5. Funds will be awarded on a "first-come" basis until funds are expended.
6. Priority deadlines: Spring Semester-February 15, Summer-June 15, Fall-September 15.

USE BLACK INK

Date	Social Security Number (optional)	Semester Enrolled
Last Name	First Name	M.I.
Street Address	City	State Zip Code
Phone Number (H)	Phone Number (W)	Fax Number

PREFIX	COURSE NUMBER	SECTION NUMBER	TITLE	CREDIT HOURS	SEMESTER & YEAR

I hereby certify that I have read the above terms and conditions of this grant and accept the award indicated on this form. If I do not receive the grant I understand that I am responsible for all charges.

Student's Signature _____ Date _____

THIS FORM MUST BE SUBMITTED TO THE CCA FINANCIAL AID OFFICE

Banner: RRAAREQ---SCHLR1 (Fall), SCHLR2 (Spring), SCHLR3 (Summer) & RHACOMM---note. Lib: GRANT ____ (semester in comment)