

**2023 CCCSFAAA CONFERENCE SCHOLARSHIP**  
California Community Colleges Student Financial Aid Administrators Association  
**Application**

PERSONAL INFO: *(Please print)* School ID Number \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Which community college are you attending Spring 23? \_\_\_\_\_

Educational Program: \_\_\_\_\_ Transfer  Associate Degree  Certificate

Career objective(s): \_\_\_\_\_

Current number of units for Spring 23 enrollment: \_\_\_\_\_

**STATEMENT OF CANDIDACY:**

On a separate sheet of paper, submit a statement explaining your:

- Special circumstances and/or unusual hardship
- Educational and career goals
- Why you have chosen these goals
- Any community involvement or leadership roles which you may have had.

**All Statements of Candidacy must be typed or electronically completed and double-spaced on white paper.**

**PERMISSION STATEMENT:**

If you are selected for a scholarship, do you give CCCSFAAA permission to use the information from your application or statement of candidacy for publicity purposes?

Yes \_\_\_\_\_ No \_\_\_\_\_ Photograph/Picture attached \_\_\_\_\_

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

Please return to:

[Financialaid@wlac.edu](mailto:Financialaid@wlac.edu)  
Subject: CCCSFA Application

**APPLICATION DEADLINE IS: April 21, 2023**