

2014-2015 Palomar College Scholarship Application

IVIE FRANCES WICKAM SCHOLARSHIP

Requirements:

- Full-time enrollment (12 units) in Spring 2014 at Palomar College
- Transferring to a 4-year University in Fall 2014
- Female
- Cumulative GPA of at least 3.0
- Demonstrate financial need
- Completed last 30 semester units of education at Palomar College
- Admissions Record for Major indicates a major in Music, Art or Education (preferred only)
- Attach a 1 to 2 page autobiography including goals
- Attach two Letters of Recommendation
- Attach unofficial transcripts from any college attended, including Palomar College
- Attach copy of your University acceptance letter

This application and all required attached documents are to be submitted to the Financial Aid & Scholarships Office no later than March 28, 2014

PLEASE TYPE ALL INFORMATION

Name:

LAST FIRST MIDDLE

Current Address:

NUMBER STREET APT. # CITY ZIP CODE

Phone Number (_____) _____ - _____

Student I.D. _____ SSN _____

Major (also in your Admissions Record): _____

STATEMENT OF ACADEMIC PROGRAM

This scholarship is partly based on your Major area of study declared on your initial Palomar College Application for Admissions and is maintained in your admissions record. Please make sure your admissions record is accurate and current in the system. If you are not clear on your reported Major in your records, contact the Admissions Office to confirm your Major.

STUDENT FINANCIAL STATEMENT

Do you currently receive financial aid at Palomar College? _____ Yes _____ No

ANSWER QUESTIONS BELOW AND LIST ESTIMATES FOR THE 2014-2015 ACADEMIC YEAR.

Income	Amount	Liabilities	Amount
Student's Net Earnings	\$	Car Loan(s)	\$
Spouse's Net Earnings	\$	Student Loan(s)	\$
Other Un-taxable Income	\$	Other	\$
Parental Assistance	\$		
Grants/Scholarships	\$		
Other	\$		
Total	\$	Total	\$

Note: Liabilities should not exceed income.

EMPLOYMENT

Employer	Dates Employed		Hours/Week	Salary/Month
	To	From		

PARENTAL FINANCIAL INFORMATION

Number of Dependents claimed as Tax Deductions _____ Last Year _____ Current Year

Income	Amount	Expenses	Amount
Father's Net Earnings	\$	Uninsured Medical Exp.	\$
Mother's Net Earnings	\$	Child Care	\$
Other Taxable Income	\$	Other	\$
Other	\$		
Total	\$	Total	\$

I certify that all information given on this application and other documents is true and complete to the best of my knowledge. If asked by an authorized official of Palomar College, I agree to give proof, which may include a copy of my, spouse's or parent's U.S. Income Tax Return. I also realize that any false statement or failure to give proof when asked may be cause for the denial of my scholarship application. I understand that the information requested on this application is confidential. I authorize Palomar College to release enrollment and financial data to scholarship donor(s). The Palomar College Foundation may use my name and non-confidential information for publicity purposes.

Applicant's Signature _____ Date _____