

# Lassen Community College

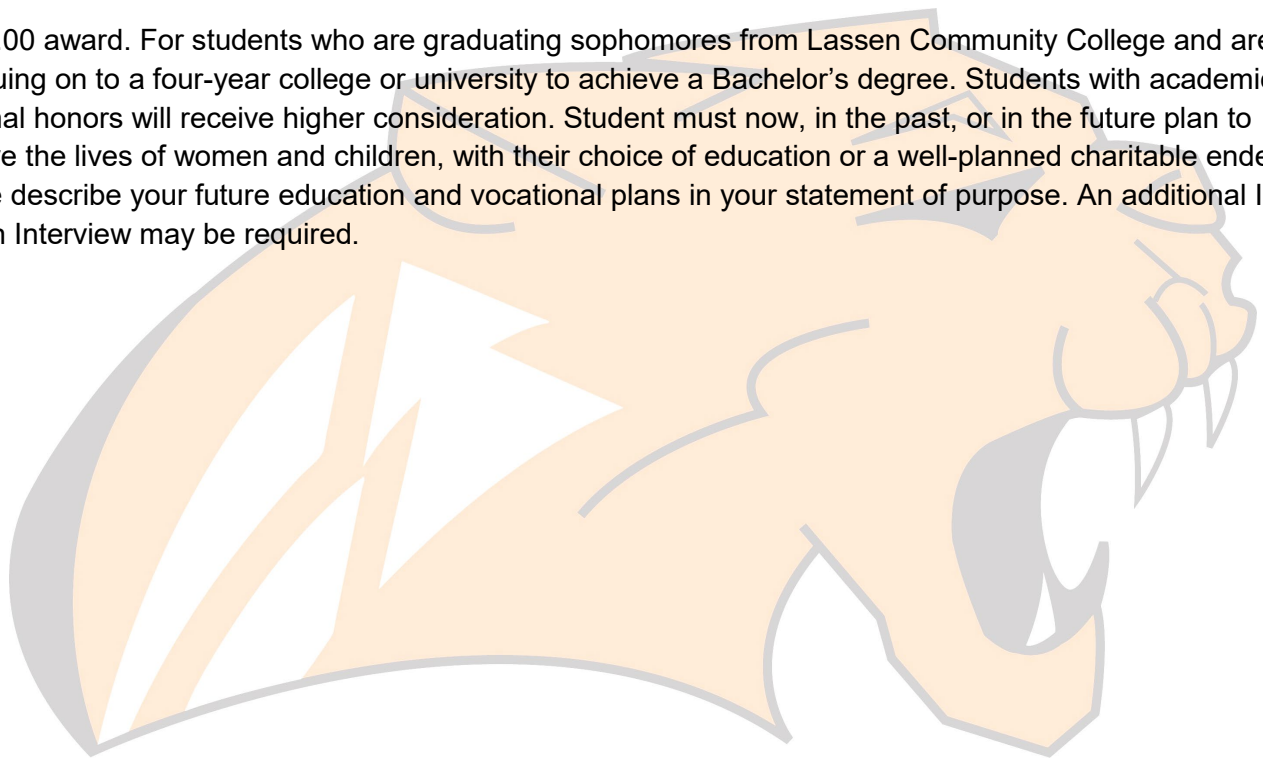
## Soroptimist College Scholarship Application

**THE SCHOLARSHIP APPLICATION ATTACHED IS TO BE USED UNLESS OTHERWISE NOTED  
AND IS DUE IN THE FINANCIAL AID OFFICE BY Friday, APRIL 12, 2024 AT 4:00PM**

**LATE AND/OR INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**

### Soroptimist College Scholarship

\$1000.00 award. For students who are graduating sophomores from Lassen Community College and are continuing on to a four-year college or university to achieve a Bachelor's degree. Students with academic and personal honors will receive higher consideration. Student must now, in the past, or in the future plan to improve the lives of women and children, with their choice of education or a well-planned charitable endeavor. Please describe your future education and vocational plans in your statement of purpose. An additional In-Person Interview may be required.



You are applying for a scholarship provided by a Lassen Community College organization or other organizations from the community. Submit your **complete** application form, Statement of Educational Purpose, and three Recommendation Forms to the Financial Aid Office by **APRIL 12, 2024**. In your Statement of Educational Purpose explain why you should receive the scholarship for which you are applying. Please keep the statement brief, no more than two typed pages double-spaced. The statement should include all information you feel will help us make a decision such as long range goals, employment, community service, service organizations, athletics and educational plans. **DO NOT INCLUDE ANY REFERENCE TO AGE, SEX, OR RACE** (Unless applicable to the scholarship for which you are applying)

**NAME** \_\_\_\_\_

**STUDENT I.D. #** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

City State Zip

**TELEPHONE** \_\_\_\_\_ **GPA** \_\_\_\_\_

What school are you attending next year? \_\_\_\_\_

What field of study are you pursuing? \_\_\_\_\_

What date will you complete your AA/AS? \_\_\_\_\_ BA/BS? \_\_\_\_\_

Have you applied for Federal Financial Aid for 2024/2025? YES \_\_\_\_\_ NO \_\_\_\_\_

LIST ANY ACADEMIC / PERSONAL / ATHLETIC HONORS WON  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Release of Information Statement: (Must check one)**

\_\_\_\_ I authorize Lassen Community College to release my name to the local press and at the Annual Awards Ceremony should I be the recipient of one or more of the scholarships or awards I have applied for on this application.

\_\_\_\_ I **DO NOT** authorize Lassen Community College to release my name to the local press and at the Annual Awards Ceremony should I be the recipient of one or more of the scholarships or awards I have applied for on this application.

In addition, I give the screening committee permission to review my academic records.

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



# LASSEN COMMUNITY COLLEGE

## SCHOLARSHIP

### RECOMMENDATION FORM

STUDENT'S  
NAME \_\_\_\_\_

LAST

FIRST

MIDDLE

Student ID Number \_\_\_\_\_ TELEPHONE \_\_\_\_\_

Check how you would rate this applicant's academic skills:

	<b>OUTSTANDING</b>	<b>ABOVE AVERAGE</b>	<b>AVERAGE</b>	<b>NEEDS IMPROVEMENT</b>
1. Academic Achievement				
2. Academic Potential				

Check how you would rate this applicant's characteristics:

	<b>STRONGLY AGREE</b>	<b>AGREE</b>	<b>SOMEWHAT DISAGREE</b>	<b>DISAGREE</b>
1. Has Positive Self Image				
2. Demonstrates Leadership				
3. Is a Self Starter				
4. Is Motivated				
5. Has Potential for Growth				

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Form Completed By:

Name \_\_\_\_\_

Position \_\_\_\_\_

School/Organization \_\_\_\_\_

Telephone \_\_\_\_\_

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