

SCHOLARSHIP APPLICATION

Tuition Assistance

Application Instructions (TYPE or PRINT IN BLACK INK):

Please complete the attached application form to apply for the CNUCOM Tuition Assistance. Complete all sections of the application. Leaving any area of the application unanswered will disqualify you from consideration. Your completed applications must be sent to the Office of the Financial Aid no later than <u>January 27, 2023, by 5 pm</u> in a sealed envelope. Late applications will not be accepted.

Requirements:

The student must demonstrate low to no current income. This will be demonstrated through a short narrative essay regarding the student's inability to pay tuition and fees, along with current income documents (e.g. W2s, current pay stubs, income tax forms, social security benefit, etc.). The student must maintain good academic standing at CNUCOM to qualify for this scholarship. The award for this scholarship is **\$2,000.00**. Applications for this scholarship will be reviewed and awarded to up to eight (8) CNUCOM students whose applications best fit the institution's criteria.

Winner(s) will be recognized at the CNU Annual Awards Ceremony.

Disbursement of Scholarship:

The scholarship awards will be posted to the students' ledgers during the second week of Fall Semester once attendance has been verified. If the student is no longer attending or no longer enrolled at CNUCOM at the time the scholarship is to be posted to the student's ledger, the fund will be returned to the scholarship pool to be used in the next scholarship cycle. The scholarship fund is strictly used to pay for tuition and fees only. It cannot be used for any other purposes.

We look forward to receiving your application.

CNUCOM Financial Aid Team

1. PERSONAL INOFRMATION (Legal	ıl name in full)	
Last Name:	First Name:	M.I
Best Email:		
Current Address:	City	State: Zip:
Telephone Number:	Cell:	
Permanent Address:	City:	State: Zip:
2. EDUCATION BACKGROUND Previous College or University:		
Major:	Minor:	
FINANCIAL NEED:		
Are you working? Yes ☐ No ☐	Hrs. per week Month	ly Income
(Please provide supporting docume unemployment benefit stub, social	ents such as paycheck stub, W2, curre security benefit letter, etc)	ent income tax return,
What is your occupation?	Employer Nam	e:
	———— (Please provide loan pri	
your education at CNUCO	M. (Essay must be typed with a min	ance and how you are currently financing imum of 500 words.) (Essay must be typed with a minimum of 500
·	ofessors. The letters should be sent d	•
	Elk Grove CA 95757	,
College of Medicine is true, ac	•	y me to the California Northstate University oconsent that my picture may be used for olarship.
Signature of scholarship appli	cant:	Date: