



ACADEMIC SCHOLARSHIP APPLICATION FORM

Sponsored by the
San Luis Obispo County Employees' Association

Applicant Information

Name: _____

Parent or Legal Guardian: _____

Your Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Alternate Phone: _____

Academic Information

Last school attended: _____ Year: _____

Last diploma or degree received: _____

Are you a returning student? Yes No

What school will you be attending: _____

What is the anticipated start date: _____

What classes and how many total units will you be taking: _____

Where will you be living? Home Campus Housing Apartment Other

Extracurricular Information

Clubs/Civic Organizations: _____

(Over)



Academic Scholarship Application Form

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Extracurricular Information (Continued)

Sports (Club or Team): _____

Volunteer Projects: _____

Essay Portion

Please attach to this application form: a typed, one page essay describing (1) your community service and (2) your academic or vocational goal as it relates towards the completion of your degree or certificate.

(Print) Applicant Name: _____

Applicant Signature: _____ Date: _____

Legal Guardian Signature: _____ Date: _____

Submit (1) Application Form, (2) one-page essay, (3) copy of High School or College transcripts, (4) two letters of reference from a teacher, community service leader, and/or person in field major to the SLOCEA office no later than May 15, 2021