

## Hawkinson Memorial Scholarship (Pooled)

Awarded to a deserving mathematics student, this scholarship is made possible through the William A. Hawkinson Endowment.

**Scholarship Amount: \$300**

**Number Awarded: 1**

**Criteria:** Applicant must be currently enrolled at Los Angeles Valley College. (Check-off as you confirm each criteria)

- Must provide unofficial copy of LACCD transcript.
- Must have completed Math 261/265, 262/266 and 263/267.
- Must have minimum GPA of 3.0 in the criteria courses.
- Must have completed or be currently enrolled in Math 270 or Math 275.

The **Deadline** for submission of application is **Mar. 14, 2018 at 4:00PM.**

Name (Print as it will appear on the award) \_\_\_\_\_

Student ID# \_\_\_\_\_

Address \_\_\_\_\_

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

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Did you receive this or any other LAVC Foundation Scholarship last year? \_\_\_NO \_\_\_YES Total Amount: \$ \_\_\_\_\_

Are you currently attending another college in addition to LAVC? \_\_\_NO \_\_\_YES. Where? \_\_\_\_\_

Have you already received a Bachelors or Post Graduate Degree? \_\_\_NO \_\_\_YES Degree \_\_\_\_\_ Country \_\_\_\_\_

**APPLICATION MATERIAL SHOULD NOT BE DOUBLE-SIDED OR STAPLED. INSTEAD, PLEASE USE PAPER CLIPS.**

### Please Read and Sign

I declare that this application, its information, and all attachments submitted to the Los Angeles Valley College Foundation are true and correct. I understand that any misrepresentation of my credentials and records is subject to disqualification of this application. If I am selected to receive this scholarship, I assure the Los Angeles Valley College Foundation that I will be enrolled at Los Angeles Valley College in the Fall 2018 Semester, or I will be transferring and registered at a four-year university. I also understand that if I am selected, I will receive the scholarship(s) in May 2018 upon the confirmation of the Financial Aid Office to ascertain if I am enrolled or have transferred. Lastly, I hereby authorize Los Angeles Valley College to release information regarding my academic record and enrollment status to the LAVC Foundation for the purpose of verifying the information I have provided for this application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Students are also encouraged to seek financial support from the Los Angeles Valley College Office of Financial Aid.

**Return application to The LAVC Foundation Office (ACA Room 2201).**