

ALUMNI & FRIENDS SCHOLARSHIP ASSOCIATION TRANSFER SCHOLARSHIP APPLICATION

Name: _____

HID Number: _____

Address: _____

Home Telephone: _____

Work Telephone: _____

Curriculum/Major: _____

Associate Degree Certificate

Expected date of HCC graduation: _____

GPA as of application: _____ Credits earned @ HCC as of expected graduation date: _____

Name 4-Year College/University: _____

Indicate your anticipated enrollment for fall: 12 or more credits 9-11 credits 6-8 credits 1-5 credits

Criteria:

Must be enrolled at HCC as a full-time or part-time student

Must have earned a minimum of 45 credits

2.50 + cumulative GPA required

Must be active in extracurricular activities at Harford Community College

Applications will not be accepted without the following attachments:

A list of Harford Community College extra curricular activities in which you participated while a student. Specify your level of involvement (i.e. club officer, member, volunteer, etc.)

A 100-200 word essay on how Harford Community College helped you achieve your goal

A copy of your HCC unofficial transcript

APPLICATION MUST BE RECEIVED BY 5:00 P.M., APRIL 16, 2019

Deliver complete application and attachments to:

Harford Community College Office of College & Alumni Development (Chesapeake Center)

I authorize the Financial Aid Office to release all necessary information (academic transcript, financial need information, scholarship application, narrative, etc.) to any scholarship committees selecting recipients. I further authorize the HCC Financial Aid Office to provide updated information required to maintain awarded scholarships or grants. Please note that some scholarships are awarded by non-College donor committees.

Signature _____

Date _____