

# NSF SCHOLARSHIPS IN SCIENCE, TECHNOLOGY, ENGINEERING, AND MATHEMATICS (S-STEM) APPLICATION FOR COLLEGE STUDENTS

## BASIC ELIGIBILITY AND GUIDELINES

Dear Skyline College Student:

Enclosed is the 2017-2018 Skyline College Scholarship Application for students currently attending Skyline College who are not considered “high school” students (high school seniors apply using a different application) EXCEPT seniors in our Middle College High School – use this application.

### Eligibility Requirements:

Applicants must satisfy the following requirements:

- Must be citizens of the United States, nationals of the United States, aliens admitted as refugees under section 207 of the Immigration and Nationality Act, or aliens lawfully admitted to the United States for permanent residence;
- Must be enrolled full-time (at least 12 units) each semester of the award;
- Must be majoring in a STEM field (Agricultural Sciences, Biological Sciences, Chemistry, Computer Science, Engineering, Environmental Sciences, Geological Sciences, Mathematics, Physics/Astronomy);
- Must demonstrate financial need as defined by the US Department of Education rules for need-based Federal financial aid;
- Must be eligible to be member of the Skyline College MESA Program;
- Overall Grade Point Average (GPA) of at least 3.0. In place of a 3.0 GPA, rising GPA, high GPA in STEM courses, and a strong letter of recommendation may also be considered.
- Completion of, or eligibility for enrollment in, College Trigonometry (MATH 130), or higher.
- A copy of a Student Educational Plan (SEP) showing all completed, in-progress, and future courses needed to transfer.
- One letter of recommendation -- preferably from a math or science instructor.
- A 300-word essay describing academic and career goals.

The completed application must be submitted **no later than 5:00 p.m. Friday, May 26, 2017** to NSF Scholarships, Bldg. 7-7130, Skyline College, 3300 College Drive., San Bruno, CA 94066. Applications postmarked by May 26, 2017 will be accepted. **Only completed application packets will be reviewed.**

A completed application packet contains the following documents:

1. Application Form (Page 3) – Completed, signed and dated.
2. College Transcripts - Include copies of ALL college coursework at Skyline College and any other colleges you have attended. If you have not taken College Trigonometry (MATH 130) or higher, you must include a high school transcript. Unofficial transcripts accepted.
3. Student Educational Plan – includes a copy of your current Student Educational Plan (SEP) showing all completed, in-process, and future courses needed to transfer.
4. Personal Statement – Must be typed, double-spaced, and a maximum of 2 pages in length. Please include information about yourself and family, your academic and career goals, detail on extra-curricular activities such as involvement in student government, clubs, sports, community service and/or volunteerism and any honors or awards you have received in the past. Also include any special circumstances or challenges you have or have overcome such as disability (physical, psychological, learning), substance abuse, domestic violence, other special family circumstances (single parent, caregiver for elderly/ill parent/grandparent), financial hardship, etc.

5. Letter of Recommendation – One letter required which should be written by a recent instructor or counselor at Skyline College who knows enough about you academically and/or personally to write a supportive letter. Please take the LETTER OF RECOMMENDATION Information Sheet (page 4 of this packet) to the person from whom you would like the letter. Please provide the person writing your letter of recommendation with a copy of your personal statement or résumé so they have enough information about you to write a strong letter of recommendation. Be courteous by giving the recommender AT LEAST TWO WEEKS lead time to write the letter (i.e. by May 12<sup>th</sup>).
  
6. **Submit one set of the above items** in the following order: [Application Form, Transcripts, Student Educational Plan (SEP), Personal Statement, Letter of Recommendation] to the Skyline College SMT Division Office (BLDG 7-7130) by the deadline.

**2017-2018 SKYLINE COLLEGE NSF S-STEM SCHOLARSHIP APPLICATION**  
**FOR COLLEGE STUDENT USE - APPLICATION DEADLINE: 5:00 PM FRIDAY, MAY 26, 2017**

**Please print clearly in blue or black ink or type:**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Evening/Other Phone \_\_\_\_\_

Student ID # ("G" # or Social Security #) \_\_\_\_\_ E-mail address \_\_\_\_\_

Academic Major \_\_\_\_\_

Number of college units completed by June 2017 \_\_\_\_\_ Cumulative Grade Point Average \_\_\_\_\_

**Check all financial aid resources you are receiving this year (2016-17):**

- BOG Fee Waiver    EOPS    PELL Grant    SEOG Grant    Cal Grant    Federal Work Study  
 Chafee Grant    VA, Dept of Rehabilitation or WIA Benefits    Other (name): \_\_\_\_\_

**Check all financial aid resources you will be applying for/receiving next year (2016-17):**

- BOG Fee Waiver    EOPS    PELL Grant    SEOG Grant    Cal Grant    Federal Work Study  
 Chafee Grant    VA, Dept of Rehabilitation or WIA Benefits    Other (name): \_\_\_\_\_

**Please check **only one** of the following:**

- Presently attending Skyline College and will **continue** at Skyline College in Fall 2017  
 Presently attending Skyline College and will **transfer** to a 4-year college/university in Fall 2017.  
College/University name: \_\_\_\_\_

**Please check **as many of the following** that apply to you now or will apply to you in 2017-18 (used for matching you with scholarship criteria):**

- Full-time student    U.S. Citizen    Permanent Resident    International Student (F-1 visa)  
 Part-time student    AB540 student    Current ESL Student    Former ESL Student  
 Volunteer    College Tutor    Works On-Campus    Works Off-Campus  
 Bilingual    Single Parent    Family member of San Mateo County peace officer  
 Foster Youth    Middle College HS    Disability (please specify): \_\_\_\_\_  
 Student club member (list club affiliation): \_\_\_\_\_

Certification: I understand that the above information is voluntary and will be used only for scholarship award eligibility and selection at Skyline College and for outside scholarships that use the Skyline College application. I understand that my voluntary omission of requested information might preclude my eligibility for one or more scholarships. I certify that all information provided in this application packet is true and factual to the best of my knowledge, and that any award may be revoked without appeal if any information is found to be false. I understand that incomplete packets and/or inaccurate information will disqualify my entire application. I understand that all data included may be verified by Skyline College and/or the San Mateo County Community College District. I hereby authorize the review of the above information.

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

**A COMPLETED SCHOLARSHIP PACKET CONTAINS the following: Application (this page), Transcripts, Student Educational Plan (SEP), Personal Statement, and Letter of Recommendation.**

**For Office Use Only:**  Application Complete  Application Incomplete: Missing Recommendation Letter  
Print name of faculty/staff member writing letter): \_\_\_\_\_

Received by SMT Office (print name) \_\_\_\_\_ Date \_\_\_\_\_

**SKYLINE COLLEGE SCHOLARSHIP PROGRAM  
LETTER OF RECOMMENDATION INFORMATION SHEET**

Student Name: \_\_\_\_\_

Please give this sheet to the person you are requesting a letter of recommendation from for your scholarship application packet.

**Recommender:**

Thank you for taking the time to write a letter of recommendation for the student named at the top of this form, who is applying for a scholarship at Skyline College. The letter you write will be used along with the student's own personal statement, transcripts, cumulative grade point average and information provided by the student on their scholarship application for consideration of a 2017-2018 scholarship. For need based scholarships, financial need will also be considered.

The student will need to submit your letter along with their other application materials no later than 5:00 p.m., Friday, May 26<sup>th</sup>, 2017 to the Skyline College SMT Division Office (Building 9 Room 109). Please make every effort to provide your letter to the student prior to this date to ensure the student has a completed packet to submit.

Please note that the recommendation letter will only be used for consideration of a scholarship and will not become part of the student's permanent records at Skyline College.

**Letter Information:**

In an effort to best understand this student, please write a letter for the student which talks about their skills, abilities, commitment, values, goals, special circumstances or personal situations you are aware of, and discuss your relationship to the student, your observations, and your estimations of the student's potential for success.

Thank you for your time and assistance to this student.