



CAPE COD
COMMUNITY
COLLEGE

Powerful Futures Start Here

**ACCE
Scholarship
Application**

**Cape Cod Community
College**

Advocates for a Community College Education (“ACCE”)

Application for Scholarship for Second Year Cape Cod Community College Students Pursuing an Associate Degree

MANDATORY REQUIREMENTS FOR ALL:

1. Applicant **must** be one of the following:

US Citizen _____ Yes _____ No

or

Resident Alien ____ Yes ____ No. If Yes, Alien Registration No. _____

Place of Birth _____

2. Applicant **must** have graduated from a Cape Cod or Islands High School ____ Yes _____ No

High School graduated from _____

3. Applicant **must** be pursuing an Associate Degree with at least **12 credit hrs a semester**: ____ Yes ____ No

PERSONAL INFORMATION

1. Legal Name _____
Last (Jr., III, etc.) First Middle Initial

2. Address _____
Street Number City/Town State Zip

3. Mailing Address if different _____
PO Box City/Town State Zip

4. Primary Telephone () _____ Secondary Telephone () _____

5. Personal Email Address _____

6. Gender ____ Female ____ Male

7. Date of Birth _____

8. Current Major or intended Major _____.

9. Intention to stay on Cape Cod after graduation or completion of 4 year college

_____ Yes _____ No.

10. Cumulative GPA for all courses taken through Spring Semester 1st year _____.

11. GPA in courses counting toward major taken through Spring Semester 1st year _____.

12. Names of two current teachers at 4C's who would be willing to provide a recommendation relative to your receiving this scholarship.

Name Department Phone No.

Name Department Phone No.

13. Attached separately please compose a **500 word Writing Sample** in which you make a case for why you deserve the Scholarship and how, if granted, it will positively impact your life and "be paid forward" in the years ahead.

Certification of Information. I certify that this information is true and accurate including that I have graduated from a Cape Cod High School and am about to enter my second year in an accredited Associate Degree program which will require at least 12 credit hours in each of my my two remaining semesters. I also understand that any misrepresentation, omission or incorrect information shall be cause for disqualification of this application with no right of appeal.

Signature Date

Signature of Parent (if applicant is under 18 years of age) Date

Applicant understands that submitting this application allows ACCE to confirm academic record (GPA) information with 4Cs officials and that a completed application contains:

1. This application form completed and signed;
2. Acknowledgement of having graduated from a Cape Cod or Islands High School;
3. Acknowledgement of presently being enrolled in an Associate Degree program with at least 12 hours per semester;
4. The Attached Financial Aid Verification Form completed and signed by a 4C's official;
5. The Attached Confirmation of Academic Achievement Form completed and signed by a 4C's official, and
6. A 500 word essay as detailed in application item #22.

ONCE FINISHED, PLEASE SEND THE COMPLETED AND SIGNED APPLICATION, THE TWO COMPLETED AND SIGNED FORMS AND THE 500 WORD ESSAY TO amscibelli@comcast.net and nedwaite@gmail.com.