



Completion Award Application

Due May 15, 2024 at 3:00 p.m.

Assistance request of fee reconciliation OR Emergency Assistance

Qualifications for this scholarship require students to be enrolled during the Spring 2024 semester with intention to complete coursework for graduation in June, 2024. Please type form.

Name _____
Last First Middle

Home/Cell # () _____ - _____ Student ID # _____

Permanent e-mail _____ Social Security # _____
(REQUIRED)

Address _____
Number & Street City Zip Code

Date of Birth ____/____/____ #of units Spring '24 ____ # of Units to Graduate ____

Requirements and Items that must be attached to this application in order for it to be complete:

1. Must have at least 2.0 GPA.
2. Completion of no more than 75 units – except nursing and rad-tech.
3. Must provide a copy of course enrollment and unofficial transcript.
4. Must provide a copy of Financial Need screen verifying unmet need and summary of unpaid fees due LACC.

Have you completed any courses at other colleges or universities? _____ If yes, please list the information requested or submit a transcript for each college or university attended.

Name of College or University	Date Attended	Date of Graduation
High school from which you graduated _____	Name and Location	Date

To which college or university to you plan to transfer? _____
Name and Location

Have you received any other scholarships from the LACC Foundation? Yes No

Final statements:

- I completed my 2023-24 FAFSA or CA Dream Act Application.
- I wish for a portion of this award to pay LACC debt relief and any remainder to cover the Spring 2024 that I have enrolled.
- I understand that I am responsible for any balance beyond my potential award of \$500 (part-time enrollment or \$850 (full-time enrollment). **OR**
- I validate that I do not have any debt remaining and require emergency assistance.

By signing this document, I verify that I understand the requirements set forth and intend to complete my course of study at LACC.

Signature _____ Date _____

You must sign and submit this application to the LACC Foundation via info@laccfoundation.org or it can be delivered to the Foundation office on the 3rd floor of the Student Union.

Funds will not be disbursed until proof of enrollment is completed

Foundation Use Only

Amount Approved: \$ _____ Date Approved: _____ Denied: _____

Lisa C. Nashua, LACCF Executive Director Signature