**Information Technology and Computer Programming Students:**

We have some scholarships to award this semester.  There are three $1,000 scholarships donated to us by the Society for Information Management.

The award of these scholarships is based on financial need and academic excellence.

You must have a FAFSA on file at Valencia which indicated that you have an unmet financial need.  If you are unsure about the FASFA showing an unmet need, submit an application anyway, and we will verify your eligibility.

The application process is very easy.  Give us the contact info on the one page form, and write a “personal statement” which is mostly your story, and what impact the scholarship will have on you.  (Save the attached form on your machine and fill it out – then attach it to an email to DrA  – [Carchibald@valenciacc.edu](https://pod51004.outlook.com/owa/redir.aspx?C=8ab171d3d85745dcb935f6efa4cf8993&URL=mailto%3aCarchibald%40valenciacc.edu) )

The form requires, a signature, but we will accept emailed – unsigned applications.  If we decide to put your application forward, I will ask you to officially sign the form and scan it, or put it in the snail-mail.

Send your application to DrA at the email below (or by snail-mail if you must) by March 12, 2011.  The committee will meet soon after that, and our objective is to name the three awardees by the end of March.

Send questions to DrA.

PS: I know your reaction is that everyone else will apply and you won’t have a chance.   When everyone does that we don’t get any applications, and have to start the process over again 

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**Colin Archibald, PhD**

**Professor, Computer Programming & Analysis (East)**

[**http://faculty.valenciacc.edu/colin\_archibald/**](https://pod51004.outlook.com/owa/redir.aspx?C=8ab171d3d85745dcb935f6efa4cf8993&URL=http%3a%2f%2ffaculty.valenciacc.edu%2fcolin_archibald%2f)

# **Valencia Community College**

# **SIM SCHOLARSHIP APPLICATION**

**2011**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ VID# or SS# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First MI Last

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City County State ZIP Code

Home phone ­­­\_\_\_\_\_\_\_\_\_\_\_\_ Work phone \_\_\_\_\_\_\_\_\_\_\_\_ Cell phone \_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Academic Information:**

Major\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ College GPA\_\_\_\_\_\_\_\_\_\_\_\_ Date you submitted the FAFSA \_\_ /\_\_ /\_\_\_

High School Attended\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ High School GPA \_\_\_\_\_\_\_\_ High School Graduation Date\_\_ /\_\_ /\_\_\_

Current Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Does your employer offer tuition reimbursement? \_\_\_yes \_\_\_no

**Please attach a brief personal statement of at least 500 words.** Your statement should include a description of your educational and career goals, extracurricular activities and should incorporate any community service you have performed. Please tell the scholarship committee the impact that you believe that education has had and will have on your life. Please explain how receiving this SIM scholarship will help you meet your educational and/or career goals.

**Read and check all boxes below before signing.**

❑ I give Valencia permission to provide my scholarship donor with a report of my academic performance, copies of my academic transcripts and to share information from my personal statement.

❑ I understand that no funds will be released for my use until I have provided Financial Aid Services with a thank you note for my scholarship donor.

❑ I will provide an update on my academic, personal and professional progress at yearend to share with my donor.

❑ I understand that this application is for scholarships selected by Valencia’s scholarship committee but may also be used to identify candidates for donor-selected scholarships.

❑ I will attend a donor recognition event or a media announcement at the request of the donor or the college foundation.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_**

Please read and check all boxes above before signing. Signature Date

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **FOR OFFICE USE ONLY** | | | | |
|  | Fall | Spring | Summer | Program: |
| Enrollment: |  |  |  | GPA: |
| **UNMET NEED** | $ | $ | $ | SAP Status: |
| Amount Awarded: | $ | $ | $ | Florida Resident: |