#### 2013-2014 MAYOR'S SCHOLARSHIP APPLICATION

Office of the Mayor 1501 Truxtun Avenue Bakersfield, CA93301 (661) 326-3770

The Mayor's Scholarship is awarded from the Mayor's Scholarship Fund at Kern Community Foundation.

**SCHOLARSHIP DEADLINE: MARCH 27, 2013** 

To be eligible for scholarship consideration, students must meet the following requirements:

- 1. Must be a resident of Bakersfield and planning on attending either Bakersfield College, Taft College or California State University, Bakersfield.
- 2. Minimum qualifying grade point average is 3.25 for a \$1,000 scholarship to CSUB, and 3.0 for a \$500 scholarship to Bakersfield or Taft colleges. (Completion of 12 college units is required for those already attending college).
- 3. Complete the attached scholarship application <u>and</u> include a typed statement of 300 words as follows:
  - a. Indicate your educational plans and career goals;
  - b. Include community and school involvement:
  - c. Include need for scholarship assistance and any special circumstances; and
  - d. Sign and date your statement.

The application <u>must</u> be typewritten and all areas completed. If you do not comply with this direction, the application will automatically be rejected.

- 4. Provide two academic recommendations and one community recommendation. Forms for these recommendations are attached. These recommendations should be typewritten and returned with your application in a confidential, sealed envelope.
- 5. Provide a copy of your high school or, if applicable, college transcripts.

6. Mail all information to: Mayor's Office

1600 Truxtun Avenue Bakersfield, CA93301

Or

Deliver to: Mayor's Office

1501 Truxtun Avenue Bakersfield, CA93301

Note: If mailed, it must be postmarked no later than March 27, 2013.

- 7. Students applying for scholarship consideration must be planning to be enrolled full-time for the 2013-2014 academic year.
- 8. An interview may be required.

SCHOLARSHIP NOTIFICATION: Scholarship winners will be announced in the month of May. Students selected to receive a scholarship will be notified by mail by the Mayor's Office. The award notice will include scholarship amount and disbursement procedures. If awarded a scholarship, the award is payable for the 2013-2014 academic year.

Note: The application form can also be obtained from the City of Bakersfield website, in a read/write format only, at <a href="https://www.bakersfieldcity.us">www.bakersfieldcity.us</a>.

# MAYOR'S SCHOLARSHIP FOUNDATION Scholarship Standards

### **Scholarship Standards:**

- Proof of full-time college or university equivalent registration.
- Maintain a 3.25 grade-point average through course of study (for \$1,000 CSUB scholarship), to be distributed in increments of \$333 per quarter and made payable jointly to the university and the student.
- Maintain a 3.0 grade-point average through course of study (for \$500 Bakersfield or Taft college scholarship), to be distributed in increments of \$250 per semester and made payable jointly to the college and the student.
- Anyone who has already received a Mayor's scholarship will need to reapply each school year and will be given priority, as long as he or she meets the above criteria.

## **Disqualification Policy:**

- Probation (no scholarship payment) if grade point average drops below 3.25 (for CSUB scholarship) or 3.0 (for Bakersfield or Taft college scholarship), or not enrolled as a full-time student during a semester or quarter.
- Dropped from scholarship program if grade point average drops below 3.25 (for CSUB scholarship) or 3.0 (for Bakersfield or Taft college scholarship), or not enrolled as a full-time student for 2 successive semesters or quarters.

If any of the above requirements are not maintained, the student will not receive scholarship monies for the succeeding semester. He or she must re-qualify the next semester or lose the scholarship.

#### 2013-2014

# **Mayor's Scholarship Application**

NOTE: Application must be completely filled out <u>and typewritten</u> (<u>or computer-generated</u>). Failure to do so will constitute automatic rejection of Application.

Last Name	F	MI		
Current Mailing Address	City	State	Zip	Phone No.
Permanent Mailing Address	City	State	Zip	Phone No.
Birthdate Age	Male F	emale		
High School:				
Date of Graduation:				
List all colleges attended, if app	icable, and in	clude dates atte	nded.	
Provide the Mayor's Office with		•	college transc	ripts.
College Major: Career Goal:			<del></del>	
College or University you will att			Iniversity, Bak	ersfield
College or University you will att			Jniversity, Bak	ersfield
Have you received a scholarship YesNo If yes, list name and amount of s	_		2014 Academ	ic year?

Indicate belov volunteer wor	w your community involvement including civic organizations, church, clubs, rk, etc.
Are you curre	ently employed? Yes No
If you name	
ıı yes, name (	of employer:
I am including	of employer: g the following confidential recommendations in support of my application for
I am including	g the following confidential recommendations in support of my application for
I am including	
I am including	the following confidential recommendations in support of my application for  1.  Teacher
I am including	g the following confidential recommendations in support of my application for  1
I am including	the following confidential recommendations in support of my application for  1. Teacher  2.
I am including	the following confidential recommendations in support of my application for  1. Teacher  2. Teacher
I am including scholarship:	the following confidential recommendations in support of my application for  1. Teacher 2. Teacher 3.
I am including scholarship:	the following confidential recommendations in support of my application for  1. Teacher 2. Teacher 3. Community Member
I am including scholarship:  ***********************************	the following confidential recommendations in support of my application for  1. Teacher 2. Teacher 3. Community Member
I am including scholarship:  ***********************************	the following confidential recommendations in support of my application for  1. Teacher  2. Teacher  3. Community Member  Ship applicant, I hereby release information contained on this application as well as transcripts to the Mayor's Scholarship Committee. In addition, I waive my right to
I am including scholarship:  ***********************************	the following confidential recommendations in support of my application for  1. Teacher  2. Teacher  3. Community Member  Ship applicant, I hereby release information contained on this application as well as transcripts to the Mayor's Scholarship Committee. In addition, I waive my right to eview confidential recommendations acquired for purposes of determining and scholarship. I understand that scholarships may be denied if any information
I am including scholarship:  *****************  As a scholars my academic access and regranting this sreported on the second content of the second content	the following confidential recommendations in support of my application for  1. Teacher  2. Teacher  3. Community Member  Ship applicant, I hereby release information contained on this application as well as transcripts to the Mayor's Scholarship Committee. In addition, I waive my right to eview confidential recommendations acquired for purposes of determining and scholarship. I understand that scholarships may be denied if any information

# CONFIDENTIAL Scholarship Recommendation Form (PLEASE TYPE)

Name of App	olicant					
The applicant has wa candidate is of vital in				commenda	ation. Your a	ssessment of this
*******	******	******	*****	*****	******	*****
How long have you ke	nown this app	licant?	Years	Months		
What is the basis for	your recomme	endation?(	(	Counseling Co-Curricu	et   Relationship  ar Activities  / Involvement	
Please rate the applic	cant on the fol	lowing attı	ibutes:			
	Excellent	Good	,	Average	Below Average	No Knowledge
Intelligence Motivation Initiative	[] [] []	[] [] []	[] [] []		[] [] []	[] []
Supplement your ration his/her worthiness for				dditional ir	nformation be	low regarding
·						
						_
This applicant is: (Ch	•	- mondod	Str	ongly reco	mmended	
	Recom		Recomr	nended wi	th reservatior	ns
Signature:						
Position						

RETURN COMPLETED FORM TO THE APPLICANT IN A SEALED CONFIDENTIAL ENVELOPE.