

DAN ALLEN MEMORIAL SCHOLARSHIP CHECK OFF LIST

Check off Completed Steps:

COMPLETED APPLICATIONS including optional section if applying for a conditional scholarship based on financial need, age, sex or ethnicity.

APPLICATION CHECK LIST: Indicate scholarships for which you are eligible.

LETTERS OF RECOMMENDATION

Please submit two letters of recommendation from CCSF instructors, counselors or staff who know you and are familiar with your class work and/or school activities. Letters should include information that will give the Scholarship Committee insight into your personal qualities, character, special talents, academic attributes, potential for making a contribution to society, etc.

ONE RECOMMENDATION LETTER MUST BE FROM ONE OF YOUR PRESENT OR PREVIOUS CCSF INSTRUCTORS. Letters are to be on CCSF letterhead or on letter of recommendation forms, available from Scholarship Office. Note: Recommendations for the CCSF General Scholarship Application are to have an original signature. These letters may be copied for other scholarships. You are encouraged to review your letters of recommendation prior to submission. Remember that faculty and staff are busy; please give them two weeks before the deadline to write your letter of recommendation.

PERSONAL STATEMENT

Please use a separate sheet. **DO NOT EXCEED TWO TYPED PAGES.** Be sure to address all items.

Please write about what is important to you, your goals, and the ways in which they are reflected in your accomplishments. Specifically give information about yourself, your family and background, your current activities, interests, employment, educational achievements, special needs, and financial circumstances.

Please write about your plans for the future. Discuss your interest in your intended major, explain how your interest in the field developed and describe any related work or volunteer experience. Include information about the steps you are taking to reach your goals.

Please explain any excess “W’s” that appear on your transcript.

Note: In addition to the content, your personal statement will be evaluated on organization, creativity, and grammar.

UNOFFICIAL TRANSCRIPTS AND COURSES IN PROGRESS

Please submit an unofficial CCSF transcript (SWRHIST) and a print-out of your current courses-in-progress (SFAREGQ) available at no charge from the Transcript Office, Conlan Hall, Room 107. Show this application when making your request and allow SEVEN days for processing.

OTHER ATTACHMENTS AND INSTRUCTIONS AS NEEDED

Dan Allen Scholarships, please note that you need to show community service in the Gay/Lesbian/Bisexual community.

SIGNATURE on page 5

MAKE APPOINTMENT with Scholarship Office or the Gay, Lesbian & Bisexual Studies Department to turn in your complete application.

EDUCATION:

Total Units Completed at City College of San Francisco: _____

Number of Units in Progress: _____

Cumulative Grade Point Average (GPA): _____

LETTERS OF RECOMMENDATION:

Please request a minimum of two and no more than three letters of recommendation. At least one letter must be from a college faculty member who has been your instructor and at least one letter to attest to gay/lesbian community service and/or creative or academic achievements of benefit to the gay/lesbian communities. Be sure these letters are received by the deadline.

PERSONAL STATEMENT:

With this application, include a separate, typed statement that gives information about yourself, your family and background, your educational achievements, your educational goals, plans for the future, etc., which will help the Dan Allen Scholarship Selection Committee be more completely informed about you. Please do not exceed two typed pages.

TRANSCRIPTS AND COURSES IN PROGRESS:

Please submit an unofficial transcript (SWRHIST) and a printout of your current courses in progress (SWAREGQ). These may be obtained at no charge in the CCSF Admissions and Records Office in Conlan Hall, Room 107, Phelan Campus. Show this application when making your request and allow 7 days for processing.

Do you intend to transfer to another education institution? (circle one)

YES

NO

What will be your major or field of study? _____

When do you expect to transfer? _____

To what school do you plan to transfer? _____

Are you enrolled in a degree program at City College of San Francisco?
(circle one)

YES

NO

What is your field of study? _____

When do you expect to graduate? _____

ACTIVITIES

List Organizations, Clubs, and extra-curricular activities in which you have been active at City College of San Francisco and/or in the community.

Please only include activities participated in since high school. Special consideration will be given to contributions made to the gay/lesbian community:

What are your special interests?

What awards or commendations have you received?

MAIL YOUR APPLICATION TO:

Dr. Ardel Thomas
Department Chair
Gay, Lesbian and Bisexual Studies
C 126
City College of San Francisco
50 Phelan Avenue
San Francisco, CA 94112

PLEASE DO NOT TURN APPLICATION INTO THE SCHOLARSHIP OFFICE

I HEREBY CERTIFY THAT THE INFORMATION PROVIDED
IN THIS APPLICATION IS GIVEN FREELY BY ME AND IS
ACCURATE TO THE BEST OF MY KNOWLEDGE.

NAME (Please print): _____

SIGNATURE: _____

DATE: _____