



SCHOLARSHIP INFORMATION

NAME OF SCHOLARSHIP (e.g. in honor or in memory of)

ORIGIN AND BRIEF SUMMARY (for named scholarship only)

Please tell us the history behind the person you are honoring/memorializing and for what specific discipline (e.g business, art, math, general) if any you would like it to utilize.

SCHOLARSHIP CRITERIA

***ALL STUDENTS MUST IDENTIFY LOS ANGELES VALLEY COLLEGE AS THEIR HOME CAMPUS**

Please select your required criteria for the scholarship						
Overall Minimum GPA	Not Required <input type="checkbox"/>	2.5 <input type="checkbox"/>	3.0 <input type="checkbox"/>	3.5 <input type="checkbox"/>	4.0 <input type="checkbox"/>	Other <input type="checkbox"/> _____
Most recent term minimum GPA	Not Required <input type="checkbox"/>	2.5 <input type="checkbox"/>	3.0 <input type="checkbox"/>	3.5 <input type="checkbox"/>	4.0 <input type="checkbox"/>	
Semester units completed	Not Required <input type="checkbox"/>	10-24 <input type="checkbox"/>	25-56 <input type="checkbox"/>	57+ <input type="checkbox"/>	<10 units <input type="checkbox"/>	
Semester units currently enrolled	Not Required <input type="checkbox"/>	3 or more <input type="checkbox"/>	6 or more <input type="checkbox"/>	9 or more <input type="checkbox"/>	12 or more <input type="checkbox"/>	
Specific major studying	Not Required <input type="checkbox"/>	Required <input type="checkbox"/>	Please list specific major: _____			
Transferring to another educational institution	Required <input type="checkbox"/>	Not-Required <input type="checkbox"/>				

ADDITIONAL CRITERIA



IN THE EVENT THERE ARE NO QUALIFIED APPLICANTS

Do not select a recipient. Defer scholarship for the following year.

Using the selection committee's discretion, choose the best applicant, or not to select anyone.

DONOR INFORMATION

DONOR NAME _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE _____ **EMAIL** _____

The above information reflects my intentions in establishing a scholarship with the Los Angeles Valley College Foundation. I understand that a \$1000 minimum gift establishes a scholarship. This scholarship will continue to exist as long as the scholarship fund does not fall below the minimum amount. If it does fall below the minimum required amount, then the remaining amount will be placed in a general scholarship pool for foundation scholarships.

PRINT NAME _____

SIGNATURE _____ **DATE** _____

PLEASE EMAIL OR MAIL THE SIGNED APPLICATION TO:

Los Angeles Valley College Foundation
5800 Fulton Avenue
Valley Glen, CA 91401

foundation@lavc.edu
818-947-2619