

# John McCollum Memorial Scholarship Application

The John McCollum Memorial Scholarship is for \$1,000.00. This scholarship was given to Lassen College from the McCollum family in memory of their son, John Donald McCollum, who had been a 1941 Lassen High School Graduate. Senior McCollum served as Superintendent of the combination District of Lassen High School and Lassen Community College. The recipient of this scholarship is recognized at the Annual Commencement Ceremony. The recipient's name is engraved on a perpetual plaque displayed at Lassen Community College.

## Criteria:

1. 2015-16 Graduating Lassen College Student
2. Fall 2016 Transfer to a Four-Year College or University
3. Academic (50%)
4. Citizenship (25%)
5. Financial Need (25%)

## Application Requirements:

1. Completed Scholarship Application
2. Academic Transcripts
3. Three Letters of Recommendation
4. Application Deadline: **April 7<sup>th</sup>, 2017**

(Please Print or Type)

NAME \_\_\_\_\_  
FIRST MIDDLE LAST

HOME ADDRESS \_\_\_\_\_  
Street (Apt. #) City State Zip

\_\_\_\_\_  
CELL PHONE NUMBER

\_\_\_\_\_  
HOME PHONE NUMBER

\_\_\_\_\_  
SOCIAL SECURITY NUMBER

\_\_\_\_\_  
DATE OF GRADUATION FROM  
LASSEN COMMUNITY COLLEGE

ACCREDITED FOUR YEAR COLLEGE OR UNIVERSITY YOU PLAN TO ATTEND FALL 2017:

\_\_\_\_\_

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(Please use additional sheets if necessary)

**ACADEMIC 50%:** Cumulative Grade Point Average at Lassen Community College: \_\_\_\_\_

**CITIZENSHIP 25%:** (Give examples of your involvement in organizations both on and off campus and list your specific contributions.)

**FINANCIAL NEED 25%:** Please complete the following based on 1 year of attendance:

Estimated Income Per Year		Estimated Expenses Per Year	
Prospective earnings while attending college	\$ _____	Tuition and Fees	\$ _____
Financial aid from parents or other sources	\$ _____	Books and Supplies	\$ _____
Loans, Grants and Scholarships (list) _____ _____	\$ _____ \$ _____	Housing Expenses _____ _____ _____	\$ _____ \$ _____ \$ _____
Other (list) _____ _____	\$ _____ \$ _____	Other debts (list) _____ _____	\$ _____ \$ _____

Comments regarding your financial status (optional): \_\_\_\_\_

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

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**Application Deadline:**  
**April 7<sup>th</sup>, 2017**  
**Return to:**  
**LASSEN COMMUNITY COLLEGE**  
**Financial Aid Office**  
**P.O. Box 3000**  
**Susanville, CA 96130**