



2009-2010 MARYLAND COMMUNITY COLLEGE
TRANSFER SCHOLARSHIP APPLICATION

Be sure to submit all of the following documents:

- Official Transcripts
- Scholarship Application

Applicants must answer all questions and submit all required documents to be considered.

Name _____
First Middle Last

Social Security Number _____ Date of Birth _____
Mo/Day/Yr

Address _____
Street Apt. No.

City State Zip+4/Postal Code Country

Daytime Phone _____ Evening Phone _____

E-mail Address _____

Do you have at least a 3.0 Cumulative GPA? Yes No If yes, what is your Cumulative GPA _____

Are you on a Visa? Yes, type _____ No

Previous or current community college _____

Degree awarded AA AS AAS Date of graduation or expected graduation _____

Do you plan to start at UMUC in Fall 2009 Spring 2010

Check one of the following

*Must select one

- I wish to be considered for a full-time scholarship. I will complete 30 credits in 2009-2010.
- I wish to be considered for a part-time scholarship. I will complete 15 credits in 2009-2010.

CERTIFICATION AND AUTHORIZATION

All of the information on this application is true and complete to the best of my knowledge. I certify that I meet all eligibility requirements as specified in this application. I understand that I may only receive one scholarship administered by UMUC per academic year. I hereby authorize UMUC to photograph me or utilize my likeness and information about my application for public relations purposes, publicity, or other scholarship opportunities.

I agree to pursue and complete 15 credits (if I study part-time) or 30 credits (if I study full-time) from UMUC in one academic year. I authorize UMUC to release personal information about me when requested by any donor or designee, my sponsoring community college, or any UMUC office for purposes relating to my scholarship application or any UMUC scholarship.

Signature of applicant _____ Date _____

Please mail to: University of Maryland University College
Attn: Community Relations/Morgan Pearson
UMUC at Dorsey Station
6865 Deerpath Road
Elkridge, MD 21075
You may also fax your application to 443-459-3505