

NASSAU COMMUNITY COLLEGE FEDERATION OF TEACHERS  
ONE EDUCATION DRIVE BLDG. F, ROOM 3293  
GARDEN CITY, NEW YORK 11530-6793

APPLICATION FOR THE

**M. Debra DeSanto Student Aide Scholarship  
in the amount of \$300**

In order to qualify for this scholarship **all** of the following information **must** be provided. Failure to do so will result in disqualification of your application.

**A. PERSONAL DATA:**

1. \_\_\_\_\_  
LAST NAME                      FIRST NAME              MIDDLE INITIAL (MR./MRS./MS.)
2. HOME ADDRESS \_\_\_\_\_  
   STREET                                      CITY                      STATE                      ZIP
3. TELEPHONE # (\_\_\_\_\_) \_\_\_\_\_
4. "N" NUMBER \_\_\_\_\_

**B. PLEASE PROVIDE A TRANSCRIPT(S) THAT ATTESTS TO THE FOLLOWING:**

5. **COMPLETION** OF A MINIMUM OF 15 CREDITS AT NCC
6. CUMMULATIVE GRADE POINT AVERAGE IS *AT LEAST* 3.00
7. CURRENTLY ENROLLED AS A FULL-TIME STUDENT IN GOOD STANDING

**C. PLEASE ATTACH ONE LETTER OF RECOMMENDATION FROM YOUR SUPERVISOR OR DEPARTMENT CHAIRPERSON ATTESTING TO AT LEAST ONE SEMESTER OF SERVICE AS A STUDENT AIDE, WHEN YOUR SERVICE BEGAN AND THAT YOU CURRENTLY HOLD THAT POSITION**

**D. OPTIONAL VOLUNTEER SERVICE - IF YOU ARE INVOLVED IN COMMUNITY OR VOLUNTEER SERVICE, PLEASE ATTACH ONE LETTER OF RECOMMENDATION ATTESTING TO THAT SERVICE**

**DO NOT INCLUDE THE CURRENT SEMESTER FOR  
REQUIRED COMPLETED CREDITS**

**E. ESSAY STATEMENT:** Please submit a *typed* essay (approximately 250 words) describing your experience as a student aide, what drew you to becoming one and what you like about being one. In addition, please describe your educational and personal accomplishments as well as your future educational goals. Remember this is a scholarship application; spelling and grammar are important. Be sure that it is clear and concise. Please adhere to topic and length requirements.

**I AFFIRM THAT THE INFORMATION SUBMITTED ON THIS FORM IS COMPLETE AND ALL ATTACHMENTS ARE ACCURATE, TO THE BEST OF MY KNOWLEDGE.**

**SIGNATURE** \_\_\_\_\_

PLEASE BE ADVISED THAT ALL INFORMATION ENTERED ON YOUR APPLICATION FORM MUST BE LEGIBLY WRITTEN OR TYPED. PLEASE NOTE THAT THE FOLLOWING ITEMS 1, 2, 3 AND 4 **MUST** BE INCLUDED; ITEM 5 IS OPTIONAL

1. YOUR TYPED ESSAY
2. A COPY OF YOUR MOST RECENT NCC TRANSCRIPT
3. YOUR SIGNED APPLICATION
4. A SEALED LETTER FROM A DEPARTMENT CHAIR OR SUPERVISOR ATTESTING TO YOU CURRENTLY BEING A STUDENT AIDE AND HAVING COMPLETED AT LEAST ONE SEMESTER IN THAT POSITION
5. INVOLVEMENT IN VOLUNTEER SERVICE IS OPTIONAL - ONE SEALED LETTER OF RECOMMENDATION FROM A SUPERVISOR WOULD BE REQUIRED IF DOCUMENTING SAID SERVICE

**NOTE: FAILURE TO INCLUDE ANY OF THE ABOVE WILL RESULT IN THE DISQUALIFICATION OF YOUR APPLICATION!**

SUBMIT YOUR COMPLETED APPLICATION TO THE NASSAU COMMUNITY COLLEGE FEDERATION OF TEACHERS OFFICE (BLDG F ROOM 3293) **BY NOON ON THURSDAY, MARCH 23, 2017.**

COMMITTEE USE ONLY

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IS THE APPLICATION COMPLETE? YES \_\_\_\_\_ NO \_\_\_\_\_

PLEASE LIST MISSING ITEMS \_\_\_\_\_

DOES THIS APPLICATION MEET DONOR CRITERIA? YES \_\_\_\_\_ NO \_\_\_\_\_

IF NOT, WHY? \_\_\_\_\_

REVIEWER'S COMMENTS:

A. INITIALS \_\_\_\_\_ DATE \_\_\_\_\_ RATING \_\_\_\_\_

COMMENTS \_\_\_\_\_

B. INITIALS \_\_\_\_\_ DATE \_\_\_\_\_ RATING \_\_\_\_\_

COMMENTS \_\_\_\_\_

C. INITIALS \_\_\_\_\_ DATE \_\_\_\_\_ RATING \_\_\_\_\_

COMMENTS \_\_\_\_\_