

# Bridgewater Transitions Scholarship

*Answers for questions 1 through 4 must be typed. You may attach typed or computer-generated materials to this application. Return the application to Beth Vezina in G-200 by March 19, 2012*

## Scholarship Requirements:

- ◆ G.P.A.  $\geq$  3.0
- ◆ Massachusetts Resident
- ◆ Associate's Degree by August 2012
- ◆ Plan to attend Bridgewater State College in Fall 2012
- ◆ Part-time students are eligible
- ◆ Not open to students who have previously attended Bridgewater State College
- ◆ **Must Qualify for Financial Aid at Bridgewater State College**

Name \_\_\_\_\_

Program \_\_\_\_\_

Concentration \_\_\_\_\_

Student I.D. \_\_\_\_\_

G.P.A. \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

\_\_\_\_\_

Email \_\_\_\_\_

Expected Date of Graduation \_\_\_\_\_

Do you qualify for financial aid at Bristol Community College? \_\_\_\_\_

Have you submitted a FAFSA to Bridgewater? \_\_\_\_\_ If so, when? \_\_\_\_\_

Which courses, if any, do you plan to take this summer? \_\_\_\_\_

Have you submitted an application or and Intent to Enroll Form to Bridgewater? \_\_\_\_\_

If so, when? \_\_\_\_\_

1. Please indicate current educational and career plans.
2. Briefly describe any volunteer community or college service activities in which you have participated. **IMPORTANT - please indicate dates of service and the number of hours per week or month you devote to these activities.**
3. Indicate involvement in other activities outside the classroom - for example, employment, family responsibilities, etc. **If employed, indicate full- or part-time and state number of hours worked per week.**
4. Please write an essay of no more than 500 words on the following topic: *If you had unlimited time and financial support to devote a year to community service, what would you choose to do and why? Type the essay, write your name on it and attach it to this application.*
5. Please attach **official** transcripts from **all** colleges you have attended including BCC.

*I certify that the information I have provided is accurate and complete. By signing this form I give the Nominating and Selection Committees access to my records.*

Signature \_\_\_\_\_

Date \_\_\_\_\_