

## **SBCOD Scholarship Advancement Award Eligibility Form**

**Student Name:**

**Student ID Number:**

**College or University Name:**

**College or University Address Bursar's Office:**

**Student Year:**

**Major (if declared):**

**Current Overall GPA ( Must be 2.5 or over):**

**PLEASE REMEMBER TO INCLUDE A COPY OF YOUR CURRENT TRANSCRIPT**

**Please Note: FINAL DUE DATE May 30th**