

SOUTH HIGH ALUMNI ASSOCIATION Scholarship Application 2025-2026

Submission Deadline: March 3, 2025

Read this application completely.

South High Alumni Association has a limited number of private scholarships for Salt Lake Community College, which are based on a combination of need and merit.

Awards consist of **full tuition**, based on in-state residency. A minimum of nine course hours are required each semester. The scholarship may be applied to tuition or student fees only.

The scholarship is effective for Fall 2025 and Spring 2026.

Requirements:

- 1. Agree to be a degree or certificate-seeking student at Salt Lake Community College.
- 2. Intend to register for at least 9 credit hours in an eligible program.
- 3. Have at least a 2.5 grade point average if a graduating high school senior or a continuing/transfer college student.
- 4. Be a South High School alumnus or a <u>direct descendant</u> of a South High alumnus. Spouses of direct descendants are also eligible to apply.
- 5. Be a U.S. citizen or legal resident, and a resident of Utah.

Applications are to be submitted with the following:

This completed form (including the essay questions as described on the next page)
<u>At least two</u> signed recommendations from people, other than family, with direct knowledge of your abilities, accomplishments, and potential. The attached forms may be used, but are not required. Make sure each form or letter is signed.
Official transcript from your high school or college. This must reflect your most recent schooling. At least one full year's records and something from your 12 th grade year or beyond is required.

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

Mail the completed application, your transcript, and two completed recommendations postmarked no later than **March 3**, **2025** to:

South High Alumni Association

Salt Lake Community College 1575 South State Street Salt Lake City, Utah 84115

Hand delivered applications will not be accepted.

If you have questions about this application, email **SHAAupdates@gmail.com**.

Do NOT give this application to the SLCC Financial Aid Office!

Applications turned in to any SLCC office will not be considered!

PERSONAL INFORMATION (Please print):							
. , ,	Office Use Only						
Name							
Mailing Address:							
City, ST Zip							
Phone(s)							
Email							
South High Alumnus Relationship – e.g. parent, grandparent, etc. (You MUST include the name of a South High alumnus [include maiden name, if applicable], their <u>relationship to you</u> , and their <u>graduation or attendance dates</u>):							
Students who have received the SHAA Scholarship in the past are	e not eligible for consideration.						
ACADEMIC INFORMATION							
Circle highest grade completed: 11 12 13 14 15 16 W	hat year?						
College Classification:							
☐ First time college student ☐ Continuing student at SLCC ☐ Trate What is your major at SLCC?							
How did you hear about the SHAA Scholarship?							
ADDITIONAL REQUIRED INFORMATION							
Each of the following questions is associated with a point val	ue.						
Answer ALL of them completely. Remember, this is our only de	epiction of why you deserve						
consideration. On a separate sheet, answer the following question							
1. What are your education and career goals? How will you have	ave an impact in society?						
2. How do you plan to finance your education? (Please explain any specific financial needs, challenges, or circumstances you think should be considered.)							
3. Other than financing your education, what has been your greatest challenge? How are you coping with these challenges? (Such as: marriage status, children, divorced, illness, disabilities, special needs, employment circumstance, etc.)							
Briefly describe your activities and accomplishments in each of the work Experience (include dates of employment, responsition, etc.) Community/Extracurricular Activities Other responsibilities, projects, or awards you feel as	sponsibilities, special projects,						
I hereby certify that the information furnished in this application is accurate and complete. I understand that submission does not guarantee an award.							
Signature Date_	_						





Deadline: March 3, 2025

Student Section

Fill out the section below. Then give this form to your counselor, teacher or someone with direct knowledge of your abilities, accomplishments, and potential. This person may not be a relative. Once complete, attach this to your scholarship application and return by March 3, 2025.

Student's Full Name:			
Mailing Address:			
City ST Zip			
Recommendation Section	on		
Name:		Position:	
School/Company:		Email:	
We would like a candid evalu Community College. You ma			
I recommend this student	[]enthusiastically	[] without reservation	[] with reservation
Signature (required)			Date





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