BROOME COMMUNITY COLLEGE FOUNDATION

JUDITH C. PECKHAM SCHOLARSHIP \$2,500

2013-2014 APPLICATION

The Judith C. Peckham Scholarship is named in honor of longtime BCC Trustee and former BCC Foundation Board Chair, Judith C. Peckham.

Open to All Majors!!

Applicants should meet the following criteria:

- 1. BCC students involved in campus extra-curricular activities and/or service learning and community service. Must hold (or have held) a leadership role in organizations in which they are involved.
- 2. Full-time students with min. 12 cum. credits (and taking a min. 12 credits current semester) continuing full-time at BCC in the Fall.
- 3. Minimum 3.0 cum. GPA

APPLICATION DEADLINE: FEBRUARY 15th by 4:30 PM

Return completed application to the BCC Foundation Office On Campus: Wales Building, W-201

Contact us at: (607)778-5182 or email: foundation@sunybroome.edu.

BROOME COMMUNITY COLLEGE FOUNDATION, INC

JUDITH C. PECKHAM SCHOLARSHIP APPLICATION

Student Name:	Student ID#
Address:	
Email:	
Phone # Cell	#:
Major:	_
Cum. Credits: Cum. GPA:	
Are you returning to BCC full-time in the Fall?	Yes No (check one)
If you circled NO, do not continue- you do not o	qualify for this award.
APPLICATION INSTRUCTIONS: Carefully read instructions. Complete all sets applied any additional pages to this applicate Be sure to sign the attached Consent Form	ion.
Please provide names and phone numbers of two (your leadership abilities along with campus and co	
1. Name:	Phone Number:
2. Name:	Phone Number:

APPLICATION MUST BE RECEIVED BY FEBRUARY 15th at 4:30 P.M. On Campus: Foundation Office, Wales Bldg. W-201 (607) 778-5182 email: foundation@sunybroome.edu

Note: Scholarships are incorporated into the student's financial aid package for the next year.

Judith C. Peckham Scholarship

(You may TYPE your answers on a separate sheet)

Describe your extra-curricular activities and/or service	learning involvement:
Describe your involvement in community services:	
Provide examples of leadership roles you have held on	campus and in the community:
Signature:	Date:

BROOME COMMUNITY COLLEGE FOUNDATION, INC.

Judith C. Peckham Scholarship

Consent to Release Information

I,
I understand that this consent form will remain in effect as long as my eligibility exists.
*Note: You must sign in front of a staff member of the BCC Foundation, 201 Wales Bldg. or a Notary Public. BRING PHOTO ID.
Student's signature Date
*Signature of Foundation staff member
Date
Certification Form I believe myself eligible for and hereby make application to receive a Judith C. Peckham Scholarship Award at Broome Community College. I certify that all statements made in this application are complete and accurate.
I understand that:
 Falsification in my application, transcripts or other attachments will disqualify my application; A Selection Committee will select scholarship recipients and that the Committee's decision will be final; Incomplete applications will not be considered; and It is my responsibility to inform the Financial Aid Office of any change in my eligibility status or of any additional awards received.
Signature Date
(Please print your name)