



## Application for Scholarship

### Student Information

Full Legal Name					Email Address: _____	
Last Name	Middle Name	First Name	Social Security Number	Date of Birth	Contact Phone	
Residential Street Address			Apt. Number	City	State	Zip Code
Time at Residence	<input type="checkbox"/> Own <input type="checkbox"/> Rent		Monthly Payment	Employer	Position	Time at Employer

### Parents Information

Father's Information			Race/Ethnicity _____		Email address: _____	
Last Name	Middle Name	First Name	Social Security Number	Date of Birth	Contact Phone	
Residential Street Address			Apt. Number	City	State	Zip Code
Time at Residence	<input type="checkbox"/> Own <input type="checkbox"/> Rent		Monthly Payment	Employer	Position	Time at Employer

Mother's Information			Race/Ethnicity _____		Email address: _____	
Last Name	Middle Name	First Name	Social Security Number	Date of Birth	Contact Phone	
Residential Street Address			Apt. Number	City	State	Zip Code
Time at Residence	<input type="checkbox"/> Own <input type="checkbox"/> Rent		Monthly Payment	Employer	Position	Time at Employer

### Academic:

GPA	SAT	ACT	School planning to attend
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### Financial:

Parent's income (on form 1040)	Applicant's income, if any	List Other Scholarships or Financial Aids received or pending
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### Others: Please attach separate page if necessary

Community Services	
Awards/Achievements	
Special Talen /Interest	
Other Foreign Languages	
How did you know OCCACC Scholarship? (must answer)	



**Real Estate and Properties Your family Owns**

Property Type: SF = Single Family, MF = Multiple Family, C = Commercial/Industrial, L = Land/Acreage

Property Type	Residence <input type="checkbox"/> SF <input type="checkbox"/> MF	<input type="checkbox"/> Vacation <input type="checkbox"/> Rental <input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L	<input type="checkbox"/> Vacation <input type="checkbox"/> Rental <input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L
Ownership %	%	%	%
Co-Owned with Spouse	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Property Address			
City, State, Zip			
Date Purchased			
Purchase Price			
Estimated Market Value			
1st Mortgage Balance			
1st Mortgage Monthly Payment			
Maturity Date			
All Other Mortgages Balance			
All Other Mortgages Monthly Payment			
Annual Property Tax / Insurance			
Gross Monthly Rental Income			

**Notes: Complete this application fully and attach the following documents with your application.**

**For details, please read our application requirements at [www.occacc.org](http://www.occacc.org)**

- 1. Application for Scholarship (original signature required)**
- 2. Your FAFSA**
- 3. Parent’s most recent two years Tax Return and signed IRS form 4506-T (original signature required)**
- 4. Autobiography (not more than 500 words)**
- 5. Signed and sealed one Recommendation letter (not more than one page).**
- 6. Transcript (cumulative, weighted and/or non-weighted)**
- 7. SAT or ACT score**

**Disclaimer: Any inaccurate, undisclosed, falsified or misleading information will automatically disqualify applicant without further consideration.**

Student’s Signature	Date	Parent’s or Guardian’s Signature	Date