## Please return completed application to: Reflections for Women PO Box 1557

Bakersfield, Ca. 93302 Must be postmarked by 12/31/2023



## BAKERSFIELD COLLEGE Student Scholarship Application Form \$500 Award



Please type or print your answers clearly

1.	Last Name	First Name		
2.	Email Address			
3.	Mailing Address			
	Street			
	City	State	Zip	
4.	Telephone Number ( )			
5.	Date of Birth: Month	Day	Year	
7.	Current Student of Bakersfield College?	Circle one Yes	No	
8.	If no, when do you plan to enroll in Bakersfield College?			
9.	Current GPA (On a 4.0 scale) Attach transcript			
10.	Name and Address of parent(s) or legal	guardian(s)		
	Name			
	Street			
	City	State	Zip	
44	Milestia			
11.	What is your major?			
11. 12.	Are you currently receiving financial ass	sistance? Circle one	Yes amount \$	No
			Yes amount \$	No
12.	Are you currently receiving financial ass		Yes amount \$	No
12.	Are you currently receiving financial ass		Yes amount \$	No
12.	Are you currently receiving financial ass		Yes amount \$	No
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12.	Are you currently receiving financial ass		Yes amount \$	No
12.	Are you currently receiving financial ass How will you use the funds if awarded to		Yes amount \$	No
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