San Pablo Youth Scholarship
JUNE 9th at 4:30 Deadline

Student Name: _____
First *Last*

Student Address: _____
City Zip Code

Parent Guardian Day Phone: _____ Evening: _____

Present School: _____ Last Grade Completed: _____

Student must have acceptable Behavior Marks on last report card.

SCHOLARSHIP INFORMATION

This scholarship is made possible by a private donation.

- This scholarship is open to all CFK eligible students living in San Pablo. (*This **does not** include the unincorporated areas that have a 94806 zip code such as Tara Hills.*)
- NOT ALL APPLICANTS WILL BE AWARDED SCHOLARSHIPS.

1. Please complete Registration form (front and back) and Behavior form. Payment must be included.

2. Please attach a copy of one of the following documents to verify low-income status:

☐ FAFSA or SAR report
☐ CA-7 or other CalWORKs documentation
☐ SSI documentation
☐ Statement from a social worker or case-worker
☐ 1040 tax form

3. Please attach a copy of one of the following to verify that you are a resident of San Pablo.

☐ Utility Bill
☐ Copy of rental agreement

4. Please submit a letter of recommendation from one of the student's current teachers. This letter should address the student's potential for success in the CFK program and be on organizational letter head.

Teacher/Counselors name: _____ Contact Phone: _____

School: _____ Class/Grade: _____

5. Student Statement: A statement written by the student on "What I hope to learn at CFK". 1 page max.

6. I certify that all of the information I have provided for this scholarship is true:_____
Parent's signature

Please mail all documents with the *REGISTRATION materials including the BEHAVIORAL form* to:
Contra Costa College: College for Kids
SSC-111
2600 Mission Bell Drive
San Pablo, CA. 94806