

ALAN J. BERMAN SCHOLARSHIP AWARD

Sponsored by the Faculty Council

The LaGuardia Faculty Council invites LaGuardia students to apply for the annual **Alan J. Berman Scholarship Award** of \$400.

ELIGIBILITY: ALL STUDENTS WITH 20 OR MORE CREDITS EARNED AT LAGUARDIA (CREDITS NOT IN PROGRESS)
(PREVIOUS RECIPIENTS ARE NOT ELIGIBLE)

APPLICATION PROCESS: Complete the application form on the **Reverse side** of this announcement.

Submit a typewritten personal statement. See **Personal Statement** on the application for more information.

Submit a copy of your most recent **Official Transcript** from the Registrar's Office.

Submit two letters of recommendation from faculty members.

APPLICATION DEADLINE:

May 31, 2011

Submit all of the information requested above to: Professor Clementine Lewis, Library, Room E-101.

THE APPLICATION FORM IS ON THE REVERSE SIDE OF THIS ANNOUNCEMENT

Applications/Announcements are also available from:

Information Desk	Main Lobby
Student Government Office	M-160
Library-(Reference Desk)	E-101
Office of Transfer Services	B-215

For more information contact:

LuAnn Butironi	luannb@lagcc.cuny.edu	C-249
	(718) 482-5274	
Jose Fabara	fabarajo@lagcc.cuny.edu	E-115
	(718) 482-5624	
Clementine Lewis	clement@lagcc.cuny.edu	E-101
	(718) 482-5428	
Jacqueline Ross	rossja@lagcc.cuny.edu	E-300
	(718) 482-5771	
Helen Rozelman	hrozelman@lagcc.cuny.edu	E-300
	(718) 482-5986	

Please Note: Your application and personal essay will be evaluated on the basis of your grade point average, personal growth, and service to the College and community. The names of the recipients will be posted in July. Recipients will receive this award at the Honors Night Ceremony in September.

ALAN J. BERMAN SCHOLARSHIP AWARD

Application

PLEASE PRINT CLEARLY

NAME _____ DATE _____

MAJOR _____ last 4 digits of SS# _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE #:(HOME) _____ (WORK OR CELL) _____

E-MAIL ADDRESS: _____

CREDITS EARNED (minimum of 20 at LaGuardia): _____

(Do Not Include Credits for the Current Session)

SESSION AND YEAR THAT YOU EXPECT TO GRADUATE: _____

NAME OF FACULTY MEMBERS WHO ARE WRITING LETTERS OF RECOMMENDATION FOR YOU:

Faculty Member's Name Department

Faculty Member's Name Department

PERSONAL STATEMENT:

Briefly describe your personal growth and development. Please limit your statement to one or two pages and include the following:

- a) Explain how your academic experiences at LaGuardia helped you to grow as a student. Possible topics might include a favorite course, a Co-op internship, or a research project.
- b) Discuss your contributions to the College. They could be, for example, leadership roles and/or extracurricular activities.
- c) Describe other *voluntary activities* or *services* performed within your community while you were a student at LaGuardia. Please attach supporting document(s) (e.g., letter of support or appreciation, thank-you letter, program of event, calendar page with event listed, certificate of appreciation, email, Web posting, etc.).

CHECKLIST

- _____ Completed Application Form
- _____ Personal Statement (include a, b and c)
- _____ Copy of Most Recent Official Transcript
- _____ Two Letters of Recommendation from LaGuardia Faculty Members
(Letters Should be Addressed to the Faculty Council Scholarship Committee)
- _____ Supporting Documentation for Community Activities or Services