

## 2024 SCHOLARSHIP APPLICATION FORM

## **Guidelines and Procedures**

- 1. This application form must be completed in full and received in our office by the deadline of 4:30 p.m. Friday, March 15, 2024. Scholarships will be awarded in the amount of \$1,000.
- 2. The following must accompany the application:
  - Copy of current official transcript from your accredited high school, college or university.
  - Evidence of acceptance and intention to enroll for Fall 2024 term at an accredited college or university (or verification of current full-time enrollment if currently attending college or university).
  - A typed, 300-word essay describing your career objectives and the benefits to be gained from this financial award as well as how you will use your education and career to give back to your community.
- 3. Applicant must have maintained and document a cumulative grade point average of 3.0 (includes high school and all colleges attended).
- 4. Applicant must be a resident of Placer County, California for at least one year, or be a relative of a PCAR Member and have a valid California Driver's License or California State Identification Card.

Type or use black or blue ink only. Print neatly. Attach additional sheet(s) if space is needed.

Secti	on A – Applicant's Identification Informati	ion		Date of App	lication:	
1.	Your Name:					
2.	Current Mailing Address:					
	Permanent Mailing Address:					
3.	Home Phone: ( )	Cell	Phon	e: ( )		
4.	Email:		7.	State of Resider	nce:	
5.	Date of Birth: / /		8.	Proof of Reside	nce (State ID, Drivers Lic. #	<i>‡</i> ):
6.	What is your current academic standing?  High School		9.	Are you a reside	ent of Placer County?	
	□ Freshman □ Senior □ Sophomore □ Other (	)		Name(s)/relation you are related:	nship of past or present PC	AR Member to whom
	resity you are currently attending. ne of High School/College/University	From		То	Major/Degree	GPA
11. W	/hat is your degree objective? □Certificate	□Associat	te (AA	A) Bachelor (B	A/BS) □Other	
12. D	ate which you expect to complete this objecti	ive: Month:_		Yea	r:	
13. Y	our current enrollment status: □Full-time (1	12 or more u	nits)	□Part-Time (less	s than 12 units)	
14. Ir	n which specific field are you planning your ca	areer?				
15 I	ist any scholarship(s) you have received with	in the last fo	ur ve	ars.		

16. List any real estate classes you	've completed or in which you	are currently enro	olled:	
17. List any real estate classes you	plan to take:			
18. How did you learn of the PCAR	Foundation scholarship?			
SECTION C - Applicant's Financia	al Information (Additional in	formation may b	e requested)	
21. Can you be claimed as a deper	ident on someone else's tax re	eturn? □Yes □	lNo	
22. How will your tuition and living e% Scholarships/Grants	expenses be paid?% Fa% % Other:	•		
23. Total Household Income in curr  □ \$75,000 - \$100,000 □ \$100,000	•	5,000 - \$50,000 🗖	1 \$50,000 - \$75,000	
24. List the applicant's current savir	ngs, trust funds or other assets	s:		
25. Applicant Employment Record (	List current employer first)		_	
Company:		From:	То:	Salary:
Address:		Supervisor:		
Phone Number:	Job Title:			Hrs/week:
Reason for Leaving:				
Company:		From:	To:	Salary:
Address:		Supervisor:		
Phone Number:	Job Title:			Hrs/week:
Reason for Leaving:				
SECTION D - Applicant's Extracu  26. Club Memberships:				is needed)
27. Sports:				

8. Fraternity/Sorority/Professional Societies:	
9. College/High School Government Involvement:	
•	d. At least two must be academic references and the third may be t sign the application. Letters of referral are welcome but not
1. Instructor's Name:	Position: Instructor of
Signature:	Phone Number: ( )
2. Instructor's Name:	Position: Instructor of
Signature:	Phone Number: ( )
3. Instructor's Name:	Position: Instructor of
	Phone Number: ( )  tion I have provided is true and correct to the best of my knowledges application is grounds for my withdrawal from consideration.
By signing this application, I certify that all the informat understand that falsification of any portion of this	tion I have provided is true and correct to the best of my knowledg
By signing this application, I certify that all the informate understand that falsification of any portion of this signature of Applicant:  APPLICATION FILING DEADL	tion I have provided is true and correct to the best of my knowledg s application is grounds for my withdrawal from consideration.
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By signing this application, I certify that all the informate understand that falsification of any portion of this signature of Applicant:  APPLICATION FILING DEADL NO LATE APPLICATION	Date:  Date:  INE: FRIDAY, MARCH 15, 2024 @ 4:30 p.m.  CATIONS WILL BE ACCEPTED.  tion and supporting materials to the following address:  PCAR Foundation 270 Technology Way, Ste 100 Rocklin, CA 95765 Tel: (916) 624-8271 Fax: (916) 624-8023
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