

Academic Senate Award Application

This application is to be completed by a De Anza employee / faculty member with the student's input. Awards will be given out at the end of each quarter.

* Required

* This form will record your name, please fill your name.

Nominating Employee's Information

1. Name of employee/title nominating this student *

2. CWID of employee nominating this student *

3. FHDA email address of employee nominating this student *

4. Amount of financial aid being requested for the student (maximum \$500 per year) *

Student Nominee's Information

5. Student's CWID *

6. Are you currently enrolled in classes at De Anza this quarter? *

Yes

No

7. Have you completed at least 18 units at De Anza?* *

Yes

No

I don't know

8. How will this money help you be successful at De Anza? *

9. What are your future educational plans (at De Anza or another college)? *

10. Are you currently on academic probation at De Anza? *

- Yes
- No
- Unsure

11. If you answered "yes" or "unsure", what is your academic plan to get back into good standing?

12. Check all of the following that apply to you. *

- Are you experiencing housing insecurity?
- Are you experiencing food insecurity?
- Are you or have you been involved in the criminal justice system or been systems impacted?
- Are you balancing school with a full-time job and/or parenting, childcare, or caregiving responsibilities?
- Are you or your parents undocumented?
- Are you unable to work in the US for any reason?
- Are you unable to be a full-time student because of circumstances out of your control?
- None of these apply to me

13. If you would like, please use the space below to expand on any of the questions above or anything else you care to share.

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