

MIAMI DADE COLLEGE The Robert Parente Memorial Film Student Scholarship Application 2016-2017

Student Name:			
Mailing Address:			
Home Phone #: ()		Work Phone #: ()
MD ID#: Can	mpus:	E-Mail Addres	s:
Date of Birth:	Sex:	Marital Sta	tus:
Ethnicity: (please circle) W B H	A I O High	n School Attended:	
Citizenship: U.S. Citizen	Perm. Resid	lent: Visa:	Other:
Legal Residence: County:		State:	
Cumulative GPA: Pr	rogram GPA:		
Expected Graduation Date:	Degree Pi	rogram: (please circle) A	AA AS BS Other
Major:			
Have you applied for Financial	Aid for 2016-201	7? (Please circle) Yes N	lo
Are you employed? (Please circle	y) Yes No		
Student Signature		Dat	e

MAIL this completed form to: Due Date: February 17th, 2017

David Medina, Scholarship DirectorMiami Dade College
District Financial Aid Office – Room 1127
11011 SW 104th Street
Miami, FL 33176

The Robert Parente Memorial Film Student Scholarship

SCHOLARSHIP CRITERIA:

- 1. Be a U.S. citizen or permanent resident
- 2. Submit a 2016-2017 FAFSA application (if you haven't already done so) and demonstrate financial need based on federal financial aid standards, as determined by the College's Financial Aid Office.
- 3. Have a cumulative grade point average of at least 3.0 at the College or, if newly enrolled at the College, at prior institutions attended.
- 4. Must have completed and passed all prerequisite courses for the Bachelor of Applied Science's internship electives or the Associate of Science's cooperative electives.
- 5. Participate in a post award photoshoot and awards ceremony to promote scholarship.
- 6. Submit an essay describing their passion for film.
- 7. Submit a letter of recommendation from a current member of the School of Entertainment & Design Technology faculty or Department Chair.

All mailed applications must be *postmarked* no later than **February 17th**, **2017**.