

To apply to the Bucknell Community College Scholars Program, please submit the following items to your community college contact.

- Bucknell Community College Scholars Program application
Complete your application online and then either submit it electronically as email attachments (preferred), or print and submit it to your community college liaison.
bucknell.edu/CommunityCollegeScholars
- FAFSA (2018-19 preferred) identifying your community college and Bucknell (003238)
fafsa.gov
- Copy of high school transcript (or GED certificate)
- Previous college transcripts (if applicable)
- Transcript request form from your community college
- Two letters of recommendation (at least one from faculty)
- Signed copy of your parents' 2016 federal income tax return. If you are 24+ years of age, you will be considered an independent student; only a signed copy of your 2016 tax return is needed (*U.S. citizens only*). If under 24 and are declaring independence, please provide supporting documentation.
- SAT or ACT score report, if taken and available

International Students: If you are an F-1 visa holder, you must also submit...

- TOEFL, IELTS or PTE score report, if taken
- International Student Financial Aid Application (ISFAA) form.
Available online at bucknell.edu/admissions/international-admissions/paying-for-bucknell.html.
- Statement from your parents and/or documents verifying family income
- Currency converter for your home country currency. There are many currency converters online.

Please note: Acceptance to the Bucknell Community College Scholars Program does not guarantee admittance to Bucknell University. Scholars must apply for admission to Bucknell after successfully completing the summer program. See bucknell.edu/CommunityCollegeScholars for more information.

PERSONAL DATA

LEGAL NAME _____
Last/Family First Middle (complete) Jr., etc.

SEX: MALE FEMALE GENDER OPTIONAL

PREFERRED FIRST NAME _____ FORMER LAST NAME(S) (if any) _____

BIRTH DATE _____ EMAIL ADDRESS (print clearly) _____
mm/dd/yyyy

PERMANENT HOME ADDRESS _____
Number and Street Apartment #

City or Town State/Province ZIP/Postal Code Country

HOME PHONE _____ CELL PHONE _____
Area Code Area Code

CITIZENSHIP U.S. CITIZEN DUAL U.S. CITIZEN (Please specify other country of citizenship) _____
 U.S. PERMANENT RESIDENT VISA; Citizen of _____ ALIEN REGISTRATION NUMBER _____
 OTHER CITIZENSHIP _____
Country(ies) Visa Type

POSSIBLE AREA(S) OF ACADEMIC CONCENTRATION/MAJOR(S) _____
 UNDECIDED

OPTIONAL DATA

The following items are optional. No information you provide will be used in a discriminatory manner.

PLACE OF BIRTH _____
City State/Province Country

FIRST LANGUAGE (if other than English) _____

LANGUAGE SPOKEN AT HOME _____

MARITAL STATUS Never Married
 Married
 Widowed
 Separated
 Divorced (date) _____
mm/dd/yyyy

Are you Hispanic or Latino?: YES NO

Race (check all that apply)

- AMERICAN INDIAN/ALASKA NATIVE
- ASIAN
- BLACK/AFRICAN AMERICAN
- NATIVE HAWAIIAN, OTHER PACIFIC ISLANDER
- WHITE, CAUCASIAN

EDUCATIONAL DATA

NAME OF HIGH SCHOOL FROM WHICH YOU GRADUATED _____

DATE OF GRADUATION (or GED CERTIFICATION) _____
Month Year

TYPE OF SCHOOL PUBLIC PRIVATE HOME SCHOOL

SCHOOL ADDRESS _____
Number and Street

City or Town State/Province ZIP/Postal Code Country

CURRENT COLLEGE/UNIVERSITY _____

List all colleges/universities at which you have taken courses for credit. Please submit an official transcript to your liaison at your community college.

COLLEGE/UNIVERSITY	LOCATION (City, State/Province)	DEGREE CANDIDATE?	DATES ATTENDED	DEGREE(S) EARNED
_____	_____	<input type="radio"/> YES <input type="radio"/> NO	_____	_____
_____	_____	<input type="radio"/> YES <input type="radio"/> NO	_____	_____
_____	_____	<input type="radio"/> YES <input type="radio"/> NO	_____	_____

EXTRACURRICULAR & VOLUNTEER ACTIVITIES

Please list your extracurricular, community and family activities and hobbies **in the order of their interest to you.**

ACTIVITY	APPROX. TIME SPENT		POSITIONS HELD, HONORS WON, ETC.
	Hours/Week	Weeks/Year	
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

WORK EXPERIENCE

Please list any jobs you have held during the past three years.

SPECIFIC NATURE OF WORK	EMPLOYER	APPROX. DATES	APPROX. # OF HOURS PER WEEK
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

REQUIRED INFORMATION

1. Have you ever been found responsible for a disciplinary violation at any educational institution you have attended from the 9th grade (or the equivalent) forward, whether related to academic misconduct or behavioral misconduct, that resulted in a disciplinary action? These actions could include, but are not limited to: probation, suspension, removal, dismissal or expulsion from the institution.
 YES NO
2. Have you ever been adjudicated guilty or convicted of a misdemeanor or felony? Note that you are not required to answer “yes” to this question or provide an explanation if the criminal adjudication or conviction has been expunged, sealed, annulled, pardoned, destroyed, erased, impounded or otherwise required by law or ordered by a court to be kept confidential.
 YES NO

If you answered yes to either or both questions, please attach a separate sheet of paper that gives the approximate date(s) of each incident, explains the circumstances and reflects on what you learned from the experience. You may use up to 400 words.

I authorize all high schools and colleges I've attended to release all requested records and authorize review of my application for the admission process indicated on this form.

Signature

Date

IMPORTANT NOTE TO THE APPLICANT

Please submit your application and required essays to your community college liaison. DO NOT submit these to Bucknell University, as it may delay the processing of your application.

SUBMIT TO:

Community College of Philadelphia

Todd Jones
Counseling Department

Email: tjones@ccp.edu
Phone: 215-751-8177

Garrett College

Ashley N. Ruby
Academic Success Advisor – Transfer Specialist

Email: ashley.ruby@garrettcollege.edu
Phone: 301-387-3733

Harrisburg Area Community College

Radecka Appiah-Padi
Dean, Student and Academic Success

Email: rappiahp@hacc.edu
Phone: 717-736-4112

Lehigh Carbon Community College

Virginia Mihalik
Transfer Counselor/Professor

Email: vmihalik@lccc.edu
Phone: 610-799-1178

Montgomery County Community College

Kristin Fulmer
Transfer Counselor

Email: kfulmer@mc3.edu
Phone: 215-641-6578

Reading Area Community College

Jodi Corbett
Director of Academic Partnerships

Email: jcorbett@racc.edu
Phone: 610-607-6219

BUCKNELL REQUIRED ESSAY

In 600 words or less, please describe the personal journey that led you to pursue a higher education degree at your community college. You may include your aspirations, challenges and accomplishments, as well as the strategies you have used to succeed in meeting your goals.

THIS SECTION IS TO BE FILLED IN **BY THE APPLICANT.**

APPLICANT'S LEGAL NAME _____
Last/Family First Middle (complete) Jr., etc.

PERMANENT HOME ADDRESS _____
Number and Street Apartment #

_____ City or Town State/Province ZIP/Postal Code Country

CURRENT COLLEGE/UNIVERSITY _____

THIS SECTION IS TO BE FILLED IN **BY THE FACULTY MEMBER.**

Dear Faculty Member,

The above named applicant is applying for the Bucknell Community College Scholars Program. This program carries a significant scholarship opportunity to attend the summer program at Bucknell University. We seek to identify applicants who have excelled academically, achieving at least a minimum cumulative 3.5 GPA in courses, demonstrated leadership and service potential outside of the classroom, and demonstrated financial need. Your recommendation will help the Selection Committee identify the most promising and deserving Scholars. For more information on the program, please see bucknell.edu/CommunityCollegeScholars.

Please offer your candid reflections, including specific examples of the applicant's academic record and potential; his/her leadership and service potential; and his/her ability to benefit from a bachelor's degree program at a selective liberal arts institution.

BACKGROUND INFORMATION

To what extent have you been acquainted with the student applicant and in what manner?

(continued)

BACKGROUND INFORMATION (cont.)

Please share relevant qualities or characteristics that describe the student applicant and any significant contributions or accomplishments at said institution.

Please list the courses for which the student candidate was enrolled and taught by you. Indicate degree of rigor (100-level, 200-level, etc.).

Please feel free to attach a signed letter of recommendation, preferably on institutional letterhead.

FACULTY MEMBER'S NAME _____
Please print or type.

FACULTY MEMBER'S TITLE _____

SCHOOL _____

SCHOOL ADDRESS _____
Number and Street

City or Town State/Province ZIP/Postal Code Country

FACULTY'S PHONE _____ FACULTY'S EMAIL _____
Area Code

Signature Date

IMPORTANT NOTE TO THE FACULTY MEMBER

Please submit this form and any other supporting documents, in a sealed envelope, to the appropriate community college liaison below. Please place your signature across the flap *after* sealing your recommendation.

SUBMIT TO:

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Todd Jones
Counseling Department

Email: tjones@ccp.edu
Phone: 215-751-8177

Garrett College

Ashley N. Ruby
Academic Success Advisor – Transfer Specialist

Email: ashley.ruby@garrettcollege.edu
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