South Mountain Community College
SCHOLARSHIP CONTRACT

Student Name ___________________________ Student Number ___________________________ Date ______________

I accept any scholarship that SMCC may award and agree to abide by the following conditions or thereby forfeit my privilege to any award during the current semester or its future renewal.

1. I must register and be actively attending at least twelve (12) credit hour.
2. I must achieve a 2.00 grade point average in at least twelve (12) credit hours during the semester immediately proceeding the semester for which the award is to be granted and complete 12 hours during the semester of the award.
3. I must participate to the satisfaction of the coach in the activity for which this award is granted.
4. I must receive his/her recommendation for a future renewal of the award.
5. Any incomplete grade must be removed before the grade point average will be computed.
6. I must participate FULLY with the academic tracking program by turning in completed tracking reports three times per semester. **Schedule is posted on the athletic information board.**
7. I will abide by the code of conduct set forth for athletes of South Mountain Community College.

All Financial Aid Applicants Please Read and Sign:

Only those with a lawful presence in the United States may qualify for Maricopa County Community College scholarships or federal Aid. Any information you provide about your legal status when you apply for financial aid or scholarships may be subject to mandatory reporting to federal immigration authorities under Arizona law. The does not apply to applications for the private scholarship funds held in and distributed by the Maricopa Community Colleges Foundation

_________________________________________  ________________________________
Signature of Scholarship Recipient             Signature of Coach

______________________________  ________________________________
Signature of Athletic Director             Signature of Parent or Guardian  
(Scholarship Recipient under 18 years old)

______________________________
Athletic Representative

I understand that if I do not meet these guidelines any scholarships awarded to me will be withdrawn and a debit card issued for the amount of the scholarship.