



GREATER BOSTON GAMING CAREER INSTITUTE

Scholarship recipients are selected based on demonstration of strong motivation to pursue a career in the gaming industry, and need for financial support of their education.

GENERAL ELIGIBILITY

Applicants for scholarships must have completed the admission interview and be accepted to the Greater Boston Gaming Career Institute and have no outstanding balance with Cambridge College.

TO APPLY FOR SCHOLARSHIP

Please submit the following documents by mail or in-person to Cambridge College, 500 Rutherford Avenue, Boston MA 02129, c/o Katie Shannon by **September 10, 2018 for the fall term.**

- o Completed Scholarship Application
- o Personal statement (see prompts below)
- o A copy of your 2017 federal tax return

NOTIFICATION OF FALL AWARD RECIPIENTS WILL BE NO LATER THAN SEPTEMBER 14, 2018.

PLEASE NOTE:

- o Scholarships are awarded based on eligibility and funding
- o Notification are not sent out to students who were not selected
- o Awardees names will be used for reporting purposes
- o Awardees may be contacted for testimonials
- o Scholarship applications are kept on file for the academic year
- o Incomplete applications will not be considered

APPLICANT INFORMATION – PLEASE PRINT CLEARLY

Last name _____ First name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Gender Male Female Non-Binary Prefer not to Say

PERSONAL STATEMENT

Please select one of the following prompts for your personal statement:

1. **What inspired you to choose this field?**
2. **How do you think your training will enrich your life?**
3. **How will this scholarship help you to achieve your goal?**

Personal Statements should be one page, Times New Roman, 12 inch, single spaced and in English. Please be sure to include your name on the document.

I have read and understand the scholarship eligibility requirements. I understand that if I am selected as a scholarship recipient, I give my voluntary consent for Cambridge College to use the information from my scholarship application and academic records for reporting purposes.

APPLICANT MUST CHECK ONE BOX: YES NO

Applicant's signature _____ Date _____

Student ID _____

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