

STAY ON LONG ISLAND SCHOLARSHIP 2025 APPLICATION

Please send electronically to soli@ncc.edu by Friday, March 7, 2025

Please note: To be eligible for this scholarship you must apply to SUNY Farmingdale before March 1, 2025

Submitting your Application:

- Complete the information below
- Save the file as Lastname_Firstname.pdf
- Email as an attachment to soli@ncc.edu with "Scholarship Application" as the subject line. (Send in your application using your Nassau Community College email account)

Submitting your Letter of Recommendation:

- Your letter of recommendation must be from a Nassau Community College Professor and must be emailed from your professors Nassau Community College email account to soli@ncc.edu. (emails from Yahoo, Hotmail, Gmail, etc. will not be accepted)

1. Personal Information

First Name

Middle Initial

Last Name

Street Address

City

State

Zip Code

N#

Cell Phone

Email

2. Academic Information

Cumulative GPA

Total # of Credits Earned

Planned Date of Graduation

Major at NCC

Planned Major

3. Application Essays

Please address the following two topics in 400 words or less each

- a. **Essay 1:** Describe your time at Nassau Community College. This may include reasons for choosing to attend NCC, involvement in clubs and organizations, classes taken or specific events or people that have influenced your time at NCC.

3. Application Essays (Continued)

Please address the following two topics in 400 words or less each

- a. **Essay 2:** Describe your future plans. This may include reasons for applying to SUNY Farmingdale State College, how this scholarship might change your path, what you hope to accomplish during your next two years of undergraduate study.

4. Activities Résumé

The following activities résumé will assist you in telling the scholarship committee(s) all that you have done to make the most of your experience at Nassau Community College.

- i. **Leadership:** Please list any awards, recognition, or accomplishments that demonstrate excellence in the area of leadership. You may enter up to two (2) items in this category.

- a. Name of Organization:
Date:
Brief Description:

- b. Name of Organization:
Date:
Brief Description:

- ii. **Campus Involvement:** Please list any activities or events that contributed or enhanced the living/learning experience for the campus community. You may enter up to two (2) items in this category.

- a. Name of Organization:
Date:
Brief Description:

- b. Name of Organization:
Date:
Brief Description:

4. Activities Résumé (Continued)

The following activities résumé will assist you in telling the scholarship committee(s) all that you have done to make the most of your experience at Nassau Community College.

iii. **Community Service:** Please list any awards, recognition, or accomplishments that demonstrate excellence in the area of community service. You may enter up to two (2) items in this category.

a. Name of Organization:

Date:

Brief Description:

b. Name of Organization:

Date:

Brief Description:

iv. **Academic Excellence, Arts, Athletics, Career Achievement, Other:** The Stay on Long Island Scholarship recognizes that our diverse student population includes many who cannot always be involved in campus activities; however, we would like to acknowledge you other achievements. Please list up to two (2) awards, recognitions, or accomplishments that demonstrate excellence in the areas listed above.

a. Name of Organization:

Date:

Brief Description:

b. Name of Organization:

Date:

Brief Description:

Stay on Long Island Initiative - 2025 Scholarship Application

OFFICE OF THE REGISTRAR

Authorization to Release Education Information

I, _____, hereby grant Nassau Community College (“the College”) irrevocable permission to use my name, voice, quotes, image, visual likeness, portrait, and photograph in all forms and media (including, but not limited to, publications, websites, catalogs, brochures, books, magazines, photo exhibits, motion picture films, and/or videos) (collectively referred to as “Works”) for the following purposes:

- 1) Teaching;
 - 2) Admissions applications;
 - 3) Professional journal and papers;
 - 4) Institutional publicity and public relations;
 - 5) Archival purposes; and
 - 6) Any other purpose which the College deems fit in the interest of education, knowledge, research, marketing, advertising, or public relations.
- I agree that all right and title and interest in and to all such Works and any reproductions or derivative work thereof shall be the exclusive property of Nassau Community College.
 - I understand that the College may keep or may use the Works and derivative works now and in the future.
 - I further consent to the use of my biographical material in connection with such photographs or other portraits or likenesses of me. I agree that the College does not owe me any compensation for the acts I have consented to in this agreement.
 - I hereby release Nassau Community College, its officers, directors, agents and employees from all liability or legal responsibility that may arise from the acts that I have authorized or consented to herein.
 - I have carefully read and understand the terms and conditions of this Authorization and Release, and agree to be bound by them.

Signature _____

Date _____

Printed Name _____

(Signature of legal guardian is needed if subject is under age 18)

Printed Name of Legal Guardian _____ Date _____

Student Last Name _____, First Name _____

Student ID Number _____

The Family Educational Rights and Privacy Act of 1974 (FERPA) serves to protect the privacy of students' education records. The right to review records resides with you, the student. However, you may choose to allow information in your education records to be released to others, such as parents. This signed form will allow Nassau Community College to release information contained in your education records, i.e., schedule/bill, grades/GPA, etc., to those you indicate below; and will be in effect until you officially change it. This release does **not** grant the recipient the ability to: change any part of the record, add or drop classes, speak with a faculty member or other College official, or request that any portion of the record be sent to a third party.

I, _____, authorize Nassau Community College to release information regarding my educational records to: (check all that apply).

_____ Name: _____

Relationship: Partner College

_____ Name: _____

Relationship: Partner College

_____ Any and all print and electronic media outlets, in connection with publicity/news releases and/or marketing materials prepared by the College.

Optional: Please restrict access to the following information:

Signature: _____

Date: _____

Additional information regarding FERPA can be found on the Nassau Community College website at: <https://www.ncc.edu/registrar/ferpa/> as well as Office of the Registrar.

FOR OFFICE USE ONLY

Date received: _____

Signature of College Official: _____

Note to College Official: This document must be returned to the campus Registrar's Office.