

GLENDALE COMMUNITY COLLEGE
AB 540 COMMUNITY SERVICE SCHOLARSHIP
Spring 2026

Application Deadline:
Friday, March 20th 2026 at 5:00 pm

IMPORTANT:

1. Applications that are incomplete WILL NOT be considered.
2. The information provided is completely confidential.
3. Upload Unofficial Transcripts or Course History (Note: We do not have access to transcripts submitted to GCC Admissions & Records)
4. Scholarship applications will be reviewed by a scholarship committee.

SCHOLARSHIP REQUIREMENTS:

1. Enrolled at GCC's Verdugo or Garfield campus for Spring 2025.
2. Must identify as AB540, DREAMER, DACA or Undocumented.
 - AB540: Eligible undocumented students in California, who meet specific criteria to pay in-state tuition at public colleges and universities.
 - DREAMER: Undocumented students who may have been brought to the U.S as a minor.
 - DACA/DACA-mented: Person who has applied and received DACA and can legally work in the United States.
 - Undocumented: Person who is not a U.S. citizen or permanent residents of the United States, who does not hold a visa to reside in the U.S.

SCHOLARSHIP AMOUNT:

- May vary depending on funding.

APPLICATION PACKAGE MUST INCLUDE THE FOLLOWING ITEMS:

- Complete scholarship application form
- GCC Verdugo/Garfield Unofficial Transcripts OR Course History
 - If it is your first semester in college, you NEED to upload high school transcripts.
 - If previously attended other colleges, please upload transcripts (unofficial transcripts will be accepted)
- Student Educational Plan (SEP)
 - You must upload a Student Educational Plan by a GCC counselor for at least 1 year of planned courses.

The Scholarship Committee reserves the right to rescind any award if it is determined that the applicant provided false information on application, is no longer enrolled at GCC for Spring 2024, or the conditions of the original award are not maintained.

Please email the completed application to:

AnthonyG@Glendale.edu

If you have questions or need help with this application, please contact:

Anthony Garcia, Dream Counselor: AnthonyG@Glendale.edu
COMPLETING YOUR APPLICATION

INSTRUCTIONS:

- Please complete ALL parts of the application!
 - Student Information, Academic Information, References, Volunteering & Activities, Personal Statements and Student & Family Income.
- If a section does not apply to your situation, please write “N/A”, meaning “not applicable” so the committee reviewing your application knows you did not skip the question.
- Sign and date your application.
- Email completed application and additional documents to: DreamResourceCenter@glendale.edu

Your application will be evaluated on the following criteria:10 Points Maximum

| CRITERIA | DESCRIPTION | TIPS |
|--|--|--|
| 3 Points for: Academic Success | Refers to your academic performance. Your cumulative GPA will be taken into consideration. For new students, we will use your high school GPA. For students who have attended community college or university, we will use your college GPA. | We encourage students to apply regardless of GPA. This is only ONE factor that will be taken into consideration. |
| 4 Points for: Level of Service/ Volunteering: | Refers to your volunteering experience. Be sure to include on and off campus volunteering involvement. Clearly specify dates and hours of service. Please provide a detailed description of the activity. | We understand that Volunteering is a privilege for many. Even if you have limited volunteering experience, please make sure to include it. |
| 3 Points for: Personal Statement Questions: | Refers to the TWO personal statement questions embedded in the application. You may discuss obstacles you have had to overcome, including but not limited to mental health, financial difficulties, personal responsibilities, etc. Anything above the normal challenges of being a student. | This is your opportunity to highlight yourself and allow the selection committee to get to know a little bit about you. |

COMMUNITY SERVICE SCHOLARSHIP

STUDENT INFORMATION

Name: _____ GCC ID# _____

Address: _____ City: _____ Zip Code: _____

Telephone #: _____ Email: _____

Do you identify as AB540, DREAMER, DACA or Undocumented: _____

How did you hear about this scholarship? _____

ACADEMIC INFORMATION

For Spring 2026, are you a: Full Time Student (12 units or more)

List your major: _____

Highest Degree You Plan to Earn: _____ Career Goal: _____

List All other Schools Attended:

| High School or College Name | Years Attended | | Grade Level or Year |
|-----------------------------|----------------|--|---------------------|
| | | | |
| | | | |
| | | | |
| | | | |

REFERENCES

Provide names of individuals who can provide information regarding your justifications for this scholarship.

Do not include family members or other students.

| NAME | ADDRESS & PHONE | RELATIONSHIP |
|------|-----------------|--------------|
| | | |
| | | |
| | | |

VOLUNTEERING & ACTIVITIES

Specify the dates and duties of all activities in which you have participated. You may copy this page if you have additional activities to list. *Please give us your best estimate of the specific number of hours for each activity.*

| Activity | Short DETAILED Description | Semester/Dates | Total Hours |
|---|--|----------------|-------------|
| Community Service and Volunteering (On and off campus) | 1. 2. | | |
| Extracurricular Activities (Clubs, Publications, Sports, etc) | 1. 2. | | |

STUDENT & FAMILY INCOME

READ BEFORE COMPLETING THIS PAGE: It is very important to provide us with specific and detailed information on your personal and family income. However, this information is strictly confidential and is for the exclusive use of this scholarship committee. It will not be shared with any other offices at the college.

STUDENT & FAMILY INCOME:

Student's expected earnings during school year \$ _____
If married, spouse's expected earnings \$ _____
Other scholarships (list names below) \$ _____
Scholarship #1 _____
Scholarship #2 _____
Scholarship #3 _____

TOTAL student income/assets \$ _____

How many people currently live in your household (including yourself)? _____

List your current employment:

Employer(s): _____ Monthly Income \$ _____

Amount earned in 2025: \$ _____ Estimated Income for 2026: \$ _____

If Married: Spouse's Occupation: _____

Employer(s): _____ Monthly Income \$ _____

Amount earned in 2025: _____ Estimated Income for 2026: _____

If you are under 24 years of age or live with your parents while attending college:

Father's Name _____ Occupation _____

Amount earned in 2025: \$ _____ Estimated Income for 2026: \$ _____

Mother's Name _____ Occupation _____

Amount earned in 2025: \$ _____ Estimated Income for 2026: \$ _____

I certify that the above information is true and accurate to the best of my knowledge. I authorize the circulation of this document and all pertinent documents among the committee members:

Student Signature _____

Date _____