



ICC Peninsula Chapter
P.O. Box 2396
Santa Clara, CA 95055
Est. 1949

Scholarship Application
College of San Mateo
Building Inspection Technology Department

Name _____ Student I.D. No. _____

Address _____ Phone: Hm _____ Cell _____

City _____ Zip Code _____ Age _____

US Citizen: Yes No Permanent Resident: Yes No

Marital Status: _____ Number of children: _____ Ages (under 18): _____

FOR SPRING 2013/FALL2013, YOU PLAN TO:

Enroll at CSM: Yes No

spring 2013 fall 2013

EDUCATIONAL HISTORY AND PLANS

List the courses you have completed in the Building Inspection Technology Program:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Cumulative grade point average: _____

What is your collegiate goal? _____

What is your career goal? _____