



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 NYIT 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:

1. Personal Information

 You 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)

First Name	Middle Initial	Last Name	
Street Address			
City	State	Zip Code	
N#	Cell Phone	Email	
Academic Inform	nation		
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 New York Institute of Technology, how this scholarship might change your path, what you hope to accomplish during your next two years of undergraduate study.

4. Activities Résumé

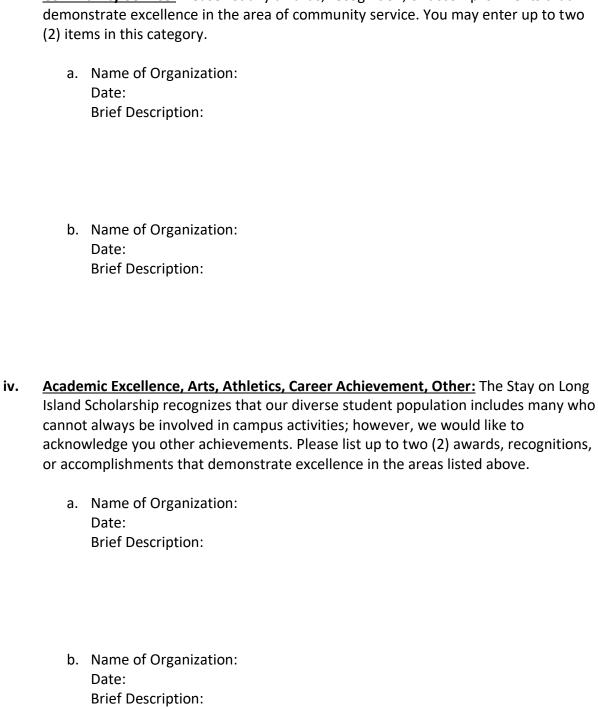
The following activities résumé will assist you in telling the scholarship committee(s) all that yc

ou h	ave don	e to make the most of your experience at Nassau Community College.
i.	demoi	rship: Please list any awards, recognition, or accomplishments that astrate excellence in the area of leadership. You may enter up to two (2) items category.
	a.	Name of Organization: Date: Brief Description:
	b.	Name of Organization: Date: Brief Description:
enhanced the living/learning ex up to two (2) items in this cates		
	a.	Name of Organization: Date: Brief Description:
	b.	Name of Organization: Date: Brief Description:

4.	Activities	Résumé l	(Continued)
┰.	ACHIVILICS	NC3ullic I	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.	<u>Community Service:</u> 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.



Stay on Long Island Initiative – 2025 Scholarship Application

OFFICE OF THE REGISTRAR

Authorization to Release Education Information

l,	, hereby grant Nassau Community College ("the
College") irrevocable permission to use my name, we photograph in all forms and media (including, but no brochures, books, magazines, photo exhibits, motion 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 marketing, advertising, or public relations.	the interest of education, knowledge, research,
 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	
Printed Name	
(Signature of legal guardian is needed if subject is u	
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 wil 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 <i>not</i> 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.						
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Name:	Relationship: Partner College					
Name:	Relationship: Partner College					
marketing materials prepared by the College. Optional: Please restrict access to the followi						
Signature:	Date:					
Additional information regarding FERPA can land https://www.ncc.edu/registrar/ferpa/ as wel	pe found on the Nassau Community College website at: I 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.