



## Application for Institutional Scholarship

2024-25 School Year

Return to Financial Aid Office, SBC, 2951 Goodwater Ave. Redding, CA 96002  
Or by email at [finaid@shasta.edu](mailto:finaid@shasta.edu) or fax at 530-221-6929

Name \_\_\_\_\_ Date \_\_\_\_\_

Year in school \_\_\_\_\_

I am applying for the following Shasta Bible College Scholarship(s):

\_\_\_\_\_

I feel I am qualified to receive this award because:

I understand that this scholarship is awarded by the Financial Aid Committee and their decision is final.

Signature \_\_\_\_\_

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OFFICE USE--

FAFSA \_\_\_\_\_

SAI \_\_\_\_\_

Other aid \_\_\_\_\_

SAP \_\_\_\_\_

Other requirements \_\_\_\_\_

Financial Aid Office comments: