

Scholarship Application for Current College Students

(ISC)² Long Island Chapter will be awarding three \$500 scholarships for the Winter or Spring 2022. These scholarships are designed to proliferate cyber security and information technology and assurance careers. A (ISC)² Long Island Chapter's mentor will be assigned to each scholarship winner. Each winner will also be awarded a one-year student chapter membership. Please read the eligibility requirements carefully and fill all sections of this application in order to be considered.

If you have any questions pertaining to this application, please reach out to the Education Committee at EduCom@isc2chapter-liny.org.

Application Deadline:

All applications must be submitted by November 15, 2021. Submission must be made to Scholarship@isc2chapter-liny.org.

Section 1: Eligibility

You must meet the following requirements to be eligible:

- Age: Be at least 16 years old by the college semester for which you are applying
- GPA: Must have minimum GPA of 3.0 (on scale of 4) and as appropriate for other grading systems
- For undergraduate or graduate study at an accredited college or university.

In order to apply for this scholarship, you must mail the application below along with the following to the (ISC)² Long Island Chapter.

- Recommendations: One letter of recommendation from a teacher or mentor.
- Transcript: Official school transcript
- Essay: 250 to 750 word essay answering the following: Why are you interested in the field of cybersecurity and how would the scholarship help you achieve your goal?

Additional requirements after receiving the scholarship:

- Chapter Meetings: Requirement to attend at least two (ISC)²-Long Island meetings.
- Chapter Assigned Mentor Meeting: One meeting at the beginning of the semester to check-in and others as needed/requested.

Section 2: School Information

Current Major: Minor

GPA:

Applying for School Year/Semester (I.e., 2022/Spring):



SLAND NY		
Section 3: Personal Information First Name: Email Address:	Last Name:	
Permanent Address: City:	State:	Zip:
Mailing Address (if different from above): City:	State:	Zip:
Honors/Awards:		
Activities Attach a separate page if additional room is required Please indicate your extra circular activities:		
Please indicate your community service or participation	in non-profit organization	on(s)
Identify any other important activity not readily disting	uished in this application	

Dated: Signed: