



## Fall 2019~ RENEWAL APPLICATION

**Renewal Period May 1st thru July 31st (Late Renewals will NOT be accepted).**

**It is your responsibility to complete the renewal application with ALL supporting documentation.**

1. **RENEWAL FORM** Please fill out this form completely.
2. **ESSAY** Write a short (1-2pg) reflection describing your personal and educational experiences over the past term. What happened (good, bad, ugly, or otherwise)? Did you face any particular challenges? Any achievements we should celebrate with you? What other news would you like to share with us?
3. **TRANSCRIPT** (Unofficial Transcripts are the ONLY acceptable documents – Student Name, GPA, Course Units)
4. **CLASS REGISTRATION** for the upcoming term (Must include course name, course number, and number of units).
5. **EMAIL** completed packet to [scholarsuccessprograms@sfachievers.org](mailto:scholarsuccessprograms@sfachievers.org)

### Student Information

Name		HS Grad Year	Date of Birth (MM/DD/YY)
Current Address (Where you live most of the year)	City	State	Zip Code
Current Mailing Address (Where checks are sent)	City	State	Zip Code
Email Address	Cell Phone	Home Phone	

### Emergency Contact

Name	Relationship
Phone Number	Email

### Current College/University Information

Current College/University		Student I.D. Number
Major	Minor	Career Goals (ex. Teacher, Doctor, CIA Agent):
College Status	GPA	Expected Graduation Semester and Year
<input type="checkbox"/> Freshman (0-29 units) <input type="checkbox"/> Sophomore (30-59 units) <input type="checkbox"/> Junior (60-89 units) <input type="checkbox"/> Senior (90+units)	Last Term GPA: _____ Cumulative GPA: _____	<input type="checkbox"/> Fall                      Year: _____ <input type="checkbox"/> Spring
Are you transferring schools?	Why are you transferring	

### Other Information

Employment Information (Please describe your current employment)

Are you currently working?  Yes     No      I am working:  Full time     Part time     Number of hours per week: 40+

Is this job related to your career track?  Yes     No

### Mentor Information

Who is your SFA Mentor?	How often you have a conversation with him/her?
	<input type="checkbox"/> Every week <input type="checkbox"/> Every other week <input type="checkbox"/> Once a month <input type="checkbox"/> Never <input type="checkbox"/> Other: _____

Do you have mentors through other organizations (coaches, advisors, peer mentors, etc)? Who are they and what kind of support do they provide you with?

Yes     No     Maybe

Description of who and their support: \_\_\_\_\_

**Essay**

Write in the space below a short (1-2pg) reflection describing your personal and educational experiences over the past term. What happened (good, bad, ugly, or otherwise)? Did you face any particular challenges? Any achievements we should celebrate with you? What other news would you like to share with us?

**Declaration**

I hereby certify that the above information given are true and correct as to the best of my knowledge.

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**