



John Braheny Scholarship
Application Form

Name of Applicant:

Last First Middle

Permanent Address:

Street Apt.#

City State Zip

Country

Phone Number Alternate No. Cell/Mobile

E-mail Address Alternate E-mail Address

Mailing Address (if different from above):

Street Apt.#

City State Zip

Applicant Name: _____

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Current College / University:

College / University Name _____

Address _____

Name of Dean _____ Phone _____

Overall GPA _____ GPA in major _____

In September of this year, I will be _____ level in my field of study.
(Sophomore/Junior/Senior)

Prior College / University (if any):

College / University Name _____

Address _____

Dates of Attendance _____ Degree Awarded (if any) _____

Overall GPA _____ GPA in major _____

Relevant Work Experience (including internships):

List most recent work experience first.

Employer 1 _____

Type of Business _____

Address _____

Applicant Name: _____

Dates _____ Position _____

Supervisor _____ Phone _____

Duties _____

Employer 2 _____

Type of Business _____

Address _____

Dates _____ Position _____

Supervisor _____ Phone _____

Duties _____

Statement of Financial Need (if applicable):

Please submit most recent FAFSA report.

FAFSA score _____

Other sources of financial aid already received with amounts _____

College Activities:

Use additional sheets and attach if necessary

Student and Professional Organizations _____

Applicant Name: _____

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Community Activities _____

Athletic Activities _____

Other _____

Permission to Release Information

By signing this application, I authorize the California Copyright Conference to confirm and/or release any information included on this application.

Applicant's Signature _____ Date _____

Please return your completed application by **March 31st** to: scholarship@theccc.org.

The California Copyright Conference

P.O. Box 57962

Sherman Oaks, CA 91413

www.theccc.org