



SILICON VALLEY EXECUTIVE CENTER SANTA CLARA UNIVERSITY

Silicon Valley Executive Center CAAP Scholarship Program Application

General Information

Name

Mailing Address

City | State | ZIP/Postal Code | Country

Email

Phone

Has your employer offered to pay all or part of your tuition and fees for this program?

- Yes**
 No

Please also include with your application:

- 250-400 word summary statement of your long-term professional goals relevant to why a CAAP scholarship is important to you.

I hereby certify that the information submitted on this application is true and correct. I realize that the misinformation included in this application will disqualify me from obtaining the scholarship. Scholarship recipients agree to the use of their names, likenesses, and information contained in their application for promotional purposes for the Silicon Valley Executive Center CAAP Scholarship Program without further compensation or notice.

Submit your completed form to caap@scu.edu for consideration.

Applicant Signature

Date
