



A  Sempira Energy utility®

Southern California Gas Company Scholarship Program **“Energizing Our Future”**

The Gas CompanySM believes that a well-educated workforce makes good business sense for a vital and healthy Southern California. The Gas Company Scholarship Program encourages students to pursue higher education following high school or community college.

The program is open to high school graduating seniors or transferring community college students in The Gas Company’s service territory who will be attending a vocational/technical school, two-year or four-year college or university.

Scholarships of \$500 will be awarded to selected graduating high school students attending a vocational/technical school or community college. Transferring community college students and high school graduates attending an accredited four-year college or university are eligible for a \$1,000 award.

APPLICANT ELIGIBILITY

1. Applicants must be graduating seniors of accredited public or private high schools or community college students transferring to a four-year college or university.
2. Students must enroll full-time beginning the fall semester of the current year.
3. High school graduates must have an overall grade point average of at least 2.5. Community college students transferring to a four-year school must have at least a 2.75 GPA.
4. Applicants must have demonstrated strong community involvement.
5. Applicants must be U.S. citizens or legal residents.
6. Applicants must have a demonstrated financial need.
7. Students with majors in engineering, business, accounting, and math will be given priority, which does not exclude other intended majors receiving scholarships, especially with graduating high school seniors.
8. Children or dependents of elected or appointed officials are not eligible.
9. Children or dependents of Gas Company employees are not eligible.

SELECTION AND VERIFICATION PROCESS

Public Affairs Managers and other representatives of The Gas Company throughout Southern California work with their communities and local organizations to identify and select scholarship recipients. The Gas Company has the final responsibility for selecting recipients, and decisions of The Gas Company are final.

The scholarship will be awarded for the fall semester/quarter of the current year, and it will be issued upon receipt of verification of full-time enrollment. Verification is due and must be received as soon as a student is enrolled, and in any event not later than September 16 (postmarks not accepted).

Awards will be issued through an independent scholarship administrator and mailed directly to students. The scholarship administrator will follow-up with scholarship recipients to provide additional information regarding their awards.

Forfeiture of Awards: Students who do not complete the required information, who fail to submit verification of enrollment, who fail to enroll as full-time students for the fall term immediately following receipt of award or who fail to provide timely verification may forfeit their award. Due to budget limitations, The Gas Company cannot hold over or delay awards from one academic term to another.

PROGRAM LIMITS

1. The Gas Company retains the right to change or terminate this program at any time, without notice.
2. The Gas Company is not responsible for lost applications, lost verification of enrollment, or information or materials misplaced or delayed through the mail or other delivery processes.
3. Once submitted, all information and materials become the property of The Gas Company, and will not be returned. All information will be kept confidential.
4. Children of employees of The Gas Company or any Sempra Energy company are not eligible.
5. Children of elected or appointed local, county and state officials are not eligible.

HOW TO APPLY

1. Carefully complete the application, listing all pertinent facts relating to your personal and academic achievements. Additional sheets of paper may be attached.
2. Request a copy of your official transcript of grades from your school.
3. Enclose with your application a recent photo of yourself, such as your school photo, preferably a color headshot measuring at least 3"x 5." This photo may be used in newspaper articles if you are a recipient.
4. Return the completed application and all other information including the transcript and photo to The Gas Company representative listed on the application. Applications must be returned no later than May 1, unless otherwise requested by written notice from the representative of The Gas Company.
5. For additional information, please contact your local representative of The Gas Company.

RELEASE REGARDING PHOTOS OF APPLICANT

By applying for this scholarship, the applicant and/or parent/guardian irrevocably release and grant to Southern California Gas Company ("SoCalGas") any residual, moral or legal rights in and to the photographs, images or pictures, including all negatives or forms of media used, taken by either of them in connection with this scholarship application.

The utilization rights granted hereby shall include all future rights of use by SoCalGas (including its parent, subsidiaries and affiliates), and its advertising representatives, at any time hereafter. Such uses may include various advertising, training, publicity, promotional and other uses regarding SoCalGas and its activities, and may appear in any form of media — including print, video, motion picture, still photographs, Internet postings and other electronic formats, or be otherwise reproduced.

Materials relating to the applicant may be combined with other materials related to such uses, including other applicants, customers or employees of SoCalGas (or its parent or affiliates).



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MUST SUBMIT ORIGINAL APPLICATION ON OR BEFORE MAY 1 (POSTMARK NOT ACCEPTED). ILLEGIBLE/INCOMPLETE APPLICATIONS WILL BE DISQUALIFIED. TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES

APPLICANT DATA

NAME Last _____ First _____ Middle Initial _____

PERMANENT HOME MAILING ADDRESS Number _____ Street _____ Apartment # _____

City _____ State _____ Zip Code _____

DATE OF BIRTH Month _____ Day _____ Year _____ Telephone _____

Social Security Number _____

E-mail address _____

Please indicate your status (for statistical purpose only)

Male Alaskan Native American Indian Asian or Pacific Islander or East Indian
 Female African American Hispanic or Latino White Other

I am applying for (check one only): Graduating High School Scholarship Transferring Community College Scholarship

Please check this box if you are a first generation student to attend a college or university.

PARENT OR GUARDIAN INFORMATION (High school only)

Last _____ First _____ Middle Initial _____

Relationship to Applicant _____ Message or Work Phone _____

HIGH SCHOOL OR COMMUNITY COLLEGE DATA

School Name _____ Completion Date: Month _____ Year _____

City _____ State _____ Telephone _____

Counselor's Name _____ Telephone _____

Applicant's overall GPA: _____ Major: _____ (Please attach official transcript.)

POST-SECONDARY SCHOOL DATA

Name of post-secondary school you plan to attend. (If unknown, please list in order which you have applied.) Use official school names. **Do not use abbreviations.**

_____ City _____ State _____

_____ City _____ State _____

4-yr. College or University Community or Junior College
 Vocational/Technical School Other, explain _____

Major or course of study _____ Anticipated date of graduation _____

Anticipated degree BA/BS Associate Certificate _____

Month _____ Year _____

If space provided in any section is inadequate, you may continue on additional sheets of paper using the same format. DO NOT repeat information already reported on the application form. Include your name, address and name of the scholarship program on all attachments.

ESSAY

Please attach an essay that answers the following questions:

- LONG TERM GOALS: Please describe your long term goals, including your educational and career objectives (up to 250 words).
- STRENGTHS AND ABILITIES: Please describe your strengths and abilities and how they relate to achieving your long term goals and aspirations (up to 250 words).
- FINANCIAL NEED: Please describe your financial need for this award, and how this award will be used to support your educational goals (up to 250 words).

COMMUNITY INVOLVEMENT/VOLUNTEER SERVICE

List at least one and up to three agencies or organizations in which you have participated without pay during the last three years (religious groups, hospital volunteer, cultural activities, outreach programs, etc.). Enter total hours per activity over the last three years. Do not use acronyms.

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|---------------------|---------------|----------------------|----------|-------------|
| SERVICE DESCRIPTION | | START DATE | END DATE | TOTAL HOURS |
| CONTACT NAME | CONTACT EMAIL | CONTACT PHONE NUMBER | | |
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| CONTACT NAME | CONTACT EMAIL | CONTACT PHONE NUMBER | | |

EXTRACURRICULAR ACTIVITIES

List up to five activities in which you have had the most involvement over the last four years (school clubs, student government, publications, varsity or club sports, theater arts, Scouting, etc.). Do not use acronyms.

| ACTIVITY | NO. OF YEARS PARTICIPATING | SPECIAL AWARDS & HONORS | OFFICES HELD |
|----------|----------------------------|-------------------------|--------------|
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WORK EXPERIENCE

List at least two jobs you have held the longest (food service, office work, babysitting, lawn mowing, etc.). Do not use acronyms.

| | | | | |
|---------------|---------------|----------------------|----------|------------|
| EMPLOYER NAME | POSITION | START DATE | END DATE | AVG HRS/WK |
| CONTACT NAME | CONTACT EMAIL | CONTACT PHONE NUMBER | | |
| EMPLOYER NAME | POSITION | START DATE | END DATE | AVG HRS/WK |
| CONTACT NAME | CONTACT EMAIL | CONTACT PHONE NUMBER | | |

APPLICATION CHECKLIST

This application for a scholarship becomes complete and valid only when you have returned all of the following materials:

- Completed student application Essay Photo Official transcript(s) of grades

Deadline is May 1 or as otherwise specified. Student is responsible for submitting all materials on time. All materials must be returned to the local Gas Company representative listed below.

CERTIFICATION

We, the applicant and the applicant's parent or guardian (high school applicants only), hereby certify that the applicant meets the basic eligibility requirements of the program as described, and that the information provided is complete and accurate to the best of our knowledge. We also agree to the scholarship application rules and terms of the Release regarding photos submitted with this application. If requested, we agree to give proof of information given on this form. Falsification of information may result in termination of any scholarship granted. (It is recommended that you keep a copy for your files.) We understand that failure to meet all requirements after the awarding of a scholarship may result in forfeiture of the awarded scholarship.

Applicant's Signature _____ Date _____

Parent/guardian Signature _____ Date _____

RETURN TO:

Joe Montenegro
The Gas Company
602 E. Ross Ave. - SC8054
El Centro, CA 92243