

HISPANIC EDUCATIONAL, CULTURAL AND SCHOLARSHIP FUND

SCHOLARSHIP APPLICATION FORM

(Please print or type)

PART 1 OF 2

APPLICANT'S INFORMATION

SOCIAL SECURITY _____ - _____ - _____

NAME: _____ DATE OF BIRTH: _____
LAST FIRST MIDDLE MONTH - DAY - YEAR

ADDRESS: _____ TELEPHONE: _____
NUMBER STREET APARTMENT NO. (AREA CODE) NUMBER

_____ E-MAIL: _____
CITY STATE ZIP CODE

PLACE OF BIRTH: _____ HISPANIC COUNTRY OF ORIGIN: _____
CITY STATE/PROV. COUNTRY (Heritage or ancestry)

TO APPLY FOR A SCHOLARSHIP YOU MUST BE A U.S. CITIZEN OR U.S. PERMANENT RESIDENT WHO HAS AN I-151, I-551, OR I-551C (ALIEN REGISTRATION RECEIPT CARD). DO YOU MEET THIS CRITERIA? _____

FIRST TIME COLLEGE-BOUND STUDENTS

HIGH SCHOOL: _____ EXPECTED GRADUATION DATE: _____
SCHOOL NAME MO - DAY - YR

HIGH SCHOOL GRADE POINT AVERAGE (GPA): _____ **Note: Official transcripts must be submitted.**

STANDARDIZED TEST SCORE AND YEAR: SAT _____ ACT _____
SCORE / YEAR SCORE / YEAR

POST SECONDARY INTITUTION TO BE ATTENDED: _____
NAME CITY STATE

COLLEGE STUDENTS

INSTITUTION: _____ EXP. GRADUATION DATE: _____
NAME CITY STATE MO - DAY - YR

MAJOR FIELD OF STUDY: _____

GRADE POINT AVERAGE (GPA): _____ **Note: Official transcripts must be submitted.**

APPLICANT'S FAMILY INFORMATION

NAME OF FATHER OR GUARDIAN: _____

ADDRESS _____ TELEPHONE: _____
NUMBER STREET APARTMENT NO. (AREA CODE) NUMBER
CITY STATE ZIP CODE PLACE OF BIRTH: _____

NAME OF MOTHER OR GUARDIAN: _____ Mother's Maiden Name _____

ADDRESS _____ TELEPHONE: _____
NUMBER STREET APARTMENT NO. (AREA CODE) NUMBER
CITY STATE ZIP CODE PLACE OF BIRTH: _____

How many of your grandparents are or were Hispanics/Latinos? _____ Where from? _____

PLEASE MAIL THE APPLICATION TO:
Scholarship Program Committee
Hispanic Educational, Cultural and Scholarship Fund
P.O. Box 411872, St. Louis, MO 63141

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PART 2 OF 2

OTHER SCHOLARSHIP DATA

Have you applied for other scholarships or grants? Yes No

If yes, please give source, amount, and duration. _____

ADDITIONAL INFORMATION

Please include additional information that would be helpful in considering you for a scholarship. Suggested information might include the following: volunteer and/or community activities, career goals, work background, family situation.

Why do you feel you deserve this scholarship?

CERTIFICATION OF TRUTH STATEMENT (Please read the following and sign below.)

I affirm that the information I have provided on this application form is complete, accurate, and true to the best of my knowledge. I authorize each college or school I have attended to release academic information as related to this application upon request. I understand that furnishing false or incomplete information on any part of this scholarship application may result in cancellation of my request for a scholarship.

Signature _____

Date _____

Write, do not print, your legal signature

HISPANIC EDUCATIONAL, CULTURAL AND SCHOLARSHIP FUND

RECOMMENDATION FORM

NAME OF APPLICANT: _____

I waive _____ do not waive _____ my right to see this recommendation.

Applicants signature: _____ Date: _____

TO THE RECOMMENDER:

Recommendations are an important component of the application process for this scholarship. The selection committee wants to be able to differentiate between applicants with similar academic credentials. Therefore, the information most useful for evaluation **describes** the applicant's academic and personal achievements. It is important to make clear the length and nature of your relationship to the applicant. Please draw on your experience and knowledge of the individual to paint as clear a picture as possible. The following questions are meant as guidelines. You are free to use this form or put your thoughts in the form of a separate letter. If you choose to write a letter, we ask that you ensure that the answers to the questions are included within it.

Thank you for your efforts on behalf of this applicant.

How long and in what capacity have you known the applicant?

What would you say are the applicant's academic and/or personal strengths? Please be as specific as possible.

What is your overall impression of the applicant as a human being, a Hispanic, a student?

What else do you want to tell us about this applicant?

Is there anything else that you would like us to know about this applicant?

Signature: _____

Date: _____

Print Name: _____

Position: _____