



SCHOLARSHIP APPLICATION
APPLICATION DEADLINE IS APRIL 1ST

Our mission is to continuously enhance the Hispanic contribution to the Southeastern Connecticut community.

I. APPLICANT INFORMATION: (Please print or type)

| | | |
|------------------|-----------------|-----------|
| Last: | First: | Middle: |
| Date of Birth: | Place of Birth: | |
| Number & Street: | | |
| City or Town: | State: | Zip Code: |
| Phone Number: | | |
| Email Address: | | |

| | |
|------------------------------|------------------|
| School currently attending: | Graduation date: |
| Current or anticipated major | |

What obstacles are in the way of your future career goals and how are you planning to overcome these obstacles?

Other colleges, vocational schools, or high schools attended

| Name & Location | Dates attended |
|-----------------|----------------|
| | |
| | |

Check those that apply to your parents, step-parents, or guardians:

| Highest level of education obtained | Less than high school | Some high school | High School Diploma | Some College | Bachelor's degree or higher |
|---|--------------------------|--------------------------|--------------------------|--------------------------|-----------------------------|
| Mother | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Father | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Number of dependent children living at home | | | | | |
| Number of dependents that will be enrolled in college for 2019-2020 | | | | | |

List in order of preference the colleges or vocational schools to which you have applied.

| Name of school | Applied (Y / N) | Accepted (Y / N / Wait) | Received Fin Aid Package* (Y / N) |
|----------------|--------------------|----------------------------|--------------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

* If you have received your Financial Aid Award Packet, please include.

II. EXTRACURRICULAR ACTIVITIES:

List your most important school, faith-based, and/or community activities. Indicate any special honors or leadership positions held.

* College/Postsecondary students need only indicate senior year and current activities.

* Resume optional for High School students, required for College/Postsecondary students.

| Activity | 9 th | 10 th | 11 th | 12 th | College | Hrs/wk | Wks/yr | Offices held, letters, other recognition |
|----------|-----------------|------------------|------------------|------------------|---------|--------|--------|--|
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Have you participated in any community service programs? If yes, please describe:

Have you had any part-time jobs while in school? Summer jobs?

Please list and indicate hours worked per week and the duration of your employment:

| Job Title | Employer | Hrs/Wk | Duration |
|-----------|----------|--------|----------|
| | | | |
| | | | |
| | | | |

Indicate below all scholarships that you have received up to this point:

| Name of Scholarship | Amount | Date Notified of Selection |
|---------------------|--------|----------------------------|
| | \$ | |
| | \$ | |
| | \$ | |
| | \$ | |
| | \$ | |

Please use this space to explain any unusual financial circumstances (loss of employment, medical bills not covered by insurance, etc.):

III. ESSAY (*One page, 1.5 spaced, 12pt font*)

1. Describe how specific events in your and your family's lives have shaped your own sense of Latino/a identity.

APPLICANT SIGNATURE: I certify that all the information provided is accurate.

Signature _____ Date _____

HISPANIC ALLIANCE / ALIANZA HISPANA

Send to:

Hispanic Alliance / Alianza Hispana
P. O. Box 227
New London, CT 06320

Phone: 860-941-9421

APPLICATION CHECKLIST

Application Deadline is April 1st

Application must be postmarked by this date

If you wish to be considered for a scholarship, the following documents must be received by the Hispanic Alliance by **April 1st**.

| | | |
|----|---|--------------------------|
| 1. | Completed Application Form | <input type="checkbox"/> |
| 2. | Completed & Signed Essay <i>(One page, 1.5 spaced, 12pt font)</i> | <input type="checkbox"/> |
| 3. | Letter of Recommendation <i>To be written by an adult who is not a family member.</i> | <input type="checkbox"/> |
| 4. | School Recommendation <i>To be completed by the Guidance Counselor, School Administrator, or other school official. College students need not submit this form with their application.</i> | <input type="checkbox"/> |
| 5. | Official Transcript <i>From current school.</i> | <input type="checkbox"/> |
| 6. | Student Aid Report (SAR) <i>Printed after completing your FAFSA.</i> | <input type="checkbox"/> |
| 7. | Financial Aid Award Letter (if received) <i>From the school you plan on attending.</i> | <input type="checkbox"/> |
| 8. | Resume <i>Optional for High School Students, Required for College Students.</i> | <input type="checkbox"/> |

Important: If you have not included any of the above documents please explain why.
Please call the Hispanic Alliance office at 860-941-9421 with any questions.