

HISPANIC LATINO SCHOLARSHIP APPLICATION FORM

The information requested on this application will help the Scholarship Committee determine your qualifications for scholarship. Therefore, it is very pertinent that you fill out all the information as completely as possible. If all questions are not filled out completely, your application will not be considered.

This application is confidential and only authorized persons who are part of the selection committee will see the information.

Please return completed application form to the Financial Aid Office – SRC 2050.

NAME LAST _____ FIRST _____ MI _____

ADDRESS _____ COUNTY _____

CITY _____ STATE _____ ZIP _____

PHONE _____ BIRTHDATE _____

SOCIAL SECURITY NUMBER _____

Present address (if different from above) _____

National Origin _____

EDUCATION:

Last High School Attended _____

Date of Graduation _____

Other Colleges Attended _____

Cumulative GPA _____ Cumulative Hours _____

Major Studies _____

EMPLOYMENT

Employer _____

Position Held _____

Number of hours worked per week _____

CURRICULAR, EXTRA CURRICULAR ACTIVITIES

List high school, college or community organizations in which you have participated:

<u>Name of Organization</u>	<u>Date of Participation</u>	<u>Position Held</u>

List special honors received:

<u>Honors</u>	<u>Dates Received</u>

Remember to submit the following items with your application:

- **Transcript**
- **Two Letters of Recommendation**
- **Essay**

College of DuPage

Letter of Recommendation Hispanic Latino Scholarship

Please describe in narrative form how long and in what capacity you have known the applicant, and why you believe the applicant deserves to receive this scholarship. Please include examples of what the student has done. Within your narrative please comment on the applicant's demonstrated proficiency in leadership, maturity, ability to work with others, judgements, integrity and initiative abilities. Please comment on the student's motivation and academic ability to succeed at the college level.

Name _____

School Address _____

Position _____

Signature _____ Date _____

College of DuPage

Letter of Recommendation Hispanic Latino Scholarship

Please describe in narrative form how long and in what capacity you have known the applicant, and why you believe the applicant deserves to receive this scholarship. Please include examples of what the student has done. Within your narrative please comment on the applicant's demonstrated proficiency in leadership, maturity, ability to work with others, judgements, integrity and initiative abilities. Please comment on the student's motivation and academic ability to succeed at the college level.

Name _____

School Address _____

Position _____

Signature _____ Date _____