

MEXICAN AMERICAN CATHOLIC FEDERATION OF LODI

DUE DATE:

**FRIDAY,
APRIL 24, 2015**

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at least 5x7 inches**

College Scholarship Application • 2015

The **Mexican American Catholic Federation of Lodi** Scholarship committee will select deserving Applicants with a cumulative **GPA of no less than 3.0** and according to the program criteria established for each year. Our Scholarships are funded through Community support of our fund-raising events. Number and dollar amount of scholarships to be determined by amount of qualified entries. The principal goal of this Scholarship is: The educational promotion, retention and support of the Hispanic youth community. Our second goal is to promote a volunteer spirit among all youth in the community. **Eligible Students are:** **1)** All LodiUSD Seniors of Hispanic heritage; and All St. Anne's Catholic Church High School Seniors, **2)** with a GPA of no less than 3.00 (based on 7½ semesters) **3)** who demonstrate a financial need to fulfill their plans of attending a college in the fall and who have similar goals as the scholarship program.

Applicant Information

Name: _____
First Middle Last

Permanent Address:: _____
Street Address City/State Zip

Mailing Address:: _____
Street Address/P. O. Box City/State Zip

Permanent Phone No:: _____ Cellular No _____
(Area Code) (Area Code)

Email Address: _____

Date of Birth: ____/____/____

Is your Family a member of St Annes Church? ____ How did you hear about our Scholarship? _____

Parent Information: _____
Father/Guardian's Name Mother/Guardian's Name

Educational Information

Graduating High School Seniors:

Current High School: _____

ACT/SAT Score: _____ GPA/Scale: _____ Major: _____
(ex. 3.0/4.0)

College you'll be attending in the Fall: _____ Full Time or Part Time
Have you been accepted yet? YES NO (Circle One)

Honors classes/Community or extracurricular activities/ other causes for which you volunteer your time (if needed use another page):

To better assist us, please tell us about the following:

Father's profession: _____ Mother's Profession: _____ Total Household Gross Income: _____
Total number of Family members living at the house: _____ Family Members currently attending College: _____
Others Scholarships for which you have applied for: _____

Estimated Semester/Quarterly Expenses

Tuition/Fees: \$ _____
Books/Materials: \$ _____
Room & Board: \$ _____
Miscellaneous: \$ _____
Total: \$ _____

Estimated Semester/Quarterly Income

Scholarships/Grants: \$ _____
Loans: \$ _____
amount of Family Support: \$ _____
Other: \$ _____
Total: \$ _____

Include with this application the following:

1) Letter of recommendation

Each applicant must submit one letter of recommendation from one of their school teacher/instructor/counselor. Letters should be on organization letterhead and should address the following:

- Recommender's relationship to applicant.
- Length of time acquainted with applicant.
- Applicant's strengths and weaknesses.
- Applicant's goals and examples that elaborate on the applicant's commitment to the Hispanic/Catholic community and community at Large.

2) Personal narrative

In a typed statement of **300-600 words**, please describe:

- Your Career Goals and ambitions, list reasons/background for pursuing the field you have chosen.
- Your Commitment to the Hispanic and/or Catholic Community.
- Your Plans to contribute to your community while in college and after you graduate.

3) Official High School transcript (in School Envelope sealed by Official School Staff)

4) SAT/ACT score report (or college entrance exam score if attending a junior college)

5) Current color photo -at least 5"x7" (which will be used to publicize the scholarship).

6) College acceptance letter (if you already have received one)

7) You may be required to further demonstrate financial need. If additional documentation is required, we will notify you.

Please Note: Students will be notified if they received an award at their school's awards ceremony or by mail.

Certification

I certify all of the information on this form is true and complete to the best of my knowledge. I understand that any change in residency, school or enrollment status not consistent with the guidelines of the program may disqualify my scholarship award. I hereby give the Mexican American Catholic Federation Scholarship Committee permission to use my photo and information in this application for the purpose of recruitment, public relations, and publicity of their Scholarship program. If awarded a scholarship, I agree to volunteer 10 Hours of my time in community events in the next School Year; at home or while at College, as a condition of accepting this Award.

Student's Signature _____ Date _____

Parent's/Guardian's Signature _____ Date _____

Applicant must be available for interviewing by the Scholarship committee. (If an interview is necessary, you will be notified by phone, of the time and place.) All guidelines and deadline requirements must be met. Failure to comply or furnish the required documentation may result in the rejection of your application. It is the applicants responsibility to obtain and submit all required information. All transcripts must be submitted by the appropriate institution. All submitted applications and supporting documentation become the property of MACF Scholarship committee and their decision on awards is final.

When completed please be sure to mail entire contents postmarked on or before the deadline to:

M.A.C.F. Scholarship Committee, P.O. BOX 553, Lodi, Ca. 95241

For additional information please contact: (209) 663-9534