**

### 2015-2016

### Southern Oregon Latino Scholarship Fund

### Scholarship Application

*“Empowering Young Latino Minds”*

The Southern Oregon Latino Scholarship Fund provides opportunities for Latino/Hispanic students living in the Southern Oregon region to complete their post high school career/degree goals. This scholarship’s primary aim is to build leadership in our region’s communities. To be eligible for this Southern Oregon Latino Scholarship Fund Scholarship, a complete application and required documents must be postmarked by **April 10, 2015.** Entering freshmen and continuing college students seeking their **first** academic degree, and students in an accredited technical training program that leads to licensure may apply.

## General Applicant Requirements:

* Must be a resident of Jackson, Josephine or Klamath counties and be of Latino heritage.
* As of academic year 2009/10, awards can be given for two years. Those who received an award previously are entitled to apply one more year.
* Must have a minimum of 3.00 cumulative high school grade point average or a minimum combined verbal and math score of 1010 on the Scholastic Aptitude Test I (SAT I) or a minimum of 21 on the American College Test (ACT).
* Continuing college students must have a minimum of a 3.00 cumulative grade point average.
* Must be enrolled full time in a degree-seeking program at an accredited community college, technical institute or public/private university for the 2015/16 academic year in Oregon.
* During the 2015/16 academic year, scholarship recipients must complete at least 30 hours of an approved community service activity.
* Must participate in a S0LSF scholarship recipient interview.

Required Application Materials:

* Submit an **official** high school or an **official** college transcript in a sealed envelope together with a completed application, personal statement essay. **(See Parts I, II )**
* Completed Activities Chart (See Part III)
* Two applicant recommendations, which may be submitted separately. (See Part IV)

SOLSF is a member of the Jackson County Community Services Consortium

2015-2016 Southern Oregon Latino Scholarship Fund

### Part I: Scholarship Application

Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Middle Initials: \_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_ Home Phone (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cellular phone: (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Best way to contact you: *(mark only one box*)  Home Phone  Cell Phone  Email

Latino heritage (Select one category that most closely characterizes your heritage):

Mexican  Central American  South American  Caribbean

Are you of the first generation in your family pursuing a post-secondary education?  yes  no

The following information is used to assess need.

Social Security # \_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_ (optional)

Student ID # from school that you plan to attend next year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you applied for the Free Application Federal Student Aid?  yes  no

If you have received a response to the FAFSA, what is your Expected Family

Contribution (EFC)? EFC: \_\_\_\_\_\_\_\_\_\_

What is the Cost of Attendance (COA) of the college that you plan to attend: \_\_\_\_\_\_\_\_\_\_

The following question is only for students currently enrolled in a public high school:

Do you qualify for free and/or reduced lunch?  yes  no

How many family members live in your household? \_\_\_\_\_\_\_

Have you been awarded other forms of financial support?  yes  no If yes, please list, including amounts: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High school, college or accredited technical training program that you are currently attending:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

College or accredited technical training program you plan to attend in the 2015-2016 academic year:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Intended major or area of study: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

By signing and dating below, I attest that the information included in this application is true to the best of my knowledge.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Applicant signature) (Date)

Any false statement will automatically disqualify applicant from receiving an award.

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### Part II: Personal Statement Essay and Applicant Recommendation

**Personal Statement Essay:**

Your essay must be a two page, double-spaced, typed 12 font format. You must address all of the following in your essay. *(If you are a second year applicant include specific examples for each prompt below that have that have occurred since your last application.)*

* Your family background including how you view your Latino heritage and its importance to you and your education.
* The financial obstacles (for example: unmet need, special economic circumstances, etc.) that you feel are impacting your ability to pursue a post-high school education.
* Academic awards, leadership and community service experience and their significance to you.
* Your planned major field of study and your future plans for making a difference in the   
  Southern Oregon Latino community.

All required application materials, transcripts, essays, and letters of recommendation must be postmarked no later than April 10, 2015. Any materials postmarked after this date will be considered late and will invalidate the application.

Mail materials to: Southern Oregon Education Service District

Southern Oregon Latino Scholarship Fund Committee

5465 S. Pacific Highway  
Phoenix, OR 97535

Application Checklist

Sealed official school transcript(s) (See Page 1)

A completed application (See Part I)

A two page personal statement essay (See Part II)

Southern Oregon Latino Scholarship Fund Activity Chart (See Part III)

Contacted one or more recommenders and have confirmed that the recommender form(s)

have been postmarked for delivery (See Part IV)

All of the above needs to be postmarked no later than April 10, 2015 to the Southern Oregon

Education Service District, Southern Oregon Latino Scholarship Fund, 5465 S. Pacific Highway,

Phoenix, OR 97535. It is recommended that applicants mail as much of it as possible in

the same envelope.

Questions concerning this scholarship opportunity may be directed to Charlie Bauer (541) 245-4595.

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|  |
| --- |
| Part III: Activities Chart  *Volunteer, Community Service and other activities\** |

\* i.e. volunteer community service, school club or group, work for pay, athletic, church, etc.

Please fill this form out on a computer! Please do not hand write in the activities!

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Activity Type | Dates  From-To  (month/  year) | Hours per  Week/Month | Total Hours | Responsibilities/Accomplishments |
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|  |  |  |  |  |

* *Please add rows to the table above as needed!*

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### Part IV: Scholarship Recommendation Form

**Applicant Recommendation Directions:**

1. Applicant should select a teacher, administrator, coach, counselor, employer or other

professional who can best respond to the prompts on this recommendation form.

1. Recommendation deadline: postmarked on or before, April 10, 2015.

Last name of applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check box to rate scholarship applicant according to the observed areas listed below.

U**nable**

## Descriptors: Superior Good Adequate Weak to rate

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Ability to work with others |  |  |  |  |  |
| Leadership |  |  |  |  |  |
| Seriousness of purpose |  |  |  |  |  |
| Initiative |  |  |  |  |  |
| Persistence |  |  |  |  |  |
| Creativity |  |  |  |  |  |
| Academic Performance |  |  |  |  |  |
| Bilingual Skills |  |  |  |  |  |
| Communication Skills |  |  |  |  |  |

Indicate the number of years you have known the scholarship applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(On the back of this form, or by attaching an additional letter, please add any other comment that you would like to share about the scholarship applicant.)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ Signature of person making recommendation Printed name (please print legibly!) Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title Name of work place Street address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip Code Work phone number

**Please return this form to: Southern Oregon Education Service District**

**Southern Oregon Latino Scholarship Fund Committee**

## 5465 S. Pacific Highway

## Phoenix, OR 97535

All applicant recommendation forms or any additional letters of recommendation must be postmarked on or before April 10, 2015 to be considered for an award. You may duplicate this form as needed.

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U**nable**

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|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Ability to work with others |  |  |  |  |  |
| Leadership |  |  |  |  |  |
| Seriousness of purpose |  |  |  |  |  |
| Initiative |  |  |  |  |  |
| Persistence |  |  |  |  |  |
| Creativity |  |  |  |  |  |
| Academic Performance |  |  |  |  |  |
| Bilingual Skills |  |  |  |  |  |
| Communication Skills |  |  |  |  |  |

Indicate the number of years you have known the scholarship applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(On the back of this form, or by attaching an additional letter, please add any other comment that you would like to share about the scholarship applicant.)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ Signature of person making recommendation Printed name (please print legibly!) Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title Name of work place Street address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip Code Work phone number

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