

Institute for Cultural Initiatives Scholarship Application

Scholarship Purpose	For bi-lingual (Spanish/English) Latino students attending a community college in Oregon.	
Eligibility Requirements	Must be a high school senior or graduate from an Oregon school, recipient or pursuing a GED in Oregon, a home schooled student in Oregon, who is planning on attending a community college in Oregon.	
Award Information Award estudents must be enrolled at least half-time. Prior recipients must reapply and compete to renew their Renewal is possible for up to four years.		
Due Date for Application Submission	March 1, 2020	

Student Name	Last Name	First Name	Middle Initial

Student Mailing Address		
Student Email Address		
Student Home Phone	Student Cell Phone	
Student Pronouns		

School Information

Name and City/State of High School Attended		
SAT Score (max. 800 per section) – If A	pplicable	ACT Score – If Applicable
Critical Reading and Writing	Mathematics	(max. 36)
College, University, or		
Educational Program You Plan		
to Attend		
Mailing Address of Institution		
Intended Major		
Intended Profession or Career		
Student ID (at college), if known		
Year in College Next	Estimated Cost of Attendance	Next
Year (freshman,	Year (tuition, fees, books, hou	sing,
sophomore, etc.)	etc.)	

Activities Chart

Please list below the activities in which you have participated. Start with most recent activities and list in reverse chronological order. Add or delete rows as needed.

		Time Spent		
Type of Activity	DatesHoursResponsibilities /(FromperTotal-To)MonthHoursor Weekor Week		Responsibilities / Accomplishments	
School/Family/Communi	ty Activit	ties:		
(1)				
(2)				
(3)				
Volunteer Service:	Volunteer Service:			
(1)				
(2)				
(3)				
Work for Pay:				
(1)				
(2)				
(3)				

Achievements and Honors List

Please detail below notable achievements, accomplishments, honors or awards related to academics or leadership. Start with most recent first and list in reverse chronological order. Add or delete rows as needed.

	Date	Achievement / Honor
(1)		
(2)		
(3)		

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Financial Resources

Please list below a summary of your financial status.

For which calendar year is			
Family Assets	Total balance in cash, savings and checking:	\$	
	Net worth (value minus debt) of investments, including real estate:	\$	
	Total Assets:	\$	
	Parent/Guardian(s):	\$	
Family Annual Gross	Student:	\$	
Income	Student spouse (if married):	\$	
	Total Income:	\$	
Number of households su	pported by gross income:		
Number of dependents su	pported by gross income:		
Number of household me			
Did you complete the Free Application for Federal Student Aid	What is your Expected Family Contribution (EFC)?	\$	
(FAFSA) or the Oregon	Are you eligible for a Pell Grant?	Yes	
Student Aid Application (ORSAA)?		No	
If so, please answer the	Are you eligible for an	Yes	
questions to the right.	Oregon Opportunity Grant?	No	
You may use the space below to describe your family's financial situation if you wish, but please do not exceed the space provided.			

Personal Statements

Please write four short essays addressing the following topics. Identify your essays by number or begin each with the essay topic, so that we know which essay relates to each topic. The essays should be approximately 150 words each.

- 1. What are your specific educational plans and career goals and why? What inspires you to achieve them?
- 2. What have you done for your family or community that you care about the most and why?
- 3. Describe a personal accomplishment and the strengths and skills you used to achieve it.
- 4. Describe a significant change or experience that has occurred in your life. How did you respond and what did you learn about yourself?

You may be eligible for other scholarships through the Office of Student Access and Completion. See <u>www.oregonstudentaid.gov</u> for information.

Demographic Information

Please check the boxes that apply.

Date of Birth	Gender		□Female □Male □Trans Female/Trans Woman □Trans Male/Trans Man □ Non-binary/Genderqueer/Gender non- conforming □Different Identity: □Choose Not to Say
Race/Ethnicity	Choose more than one, if applicable. □White □Hispanic □Asian □American Indian or Alaska Native		□Black or African-American □Native Hawaiian or Pacific Islander □Other: □Choose Not to Say
Family Education History	Highest education completed by Parent 1/Caregiver 1 Elementary School High School College or Beyond Don't Know		Highest education completed by Parent 2/Caregiver 2 □Elementary School □Middle School □High School □College or Beyond □Don't Know

Requirements for Submission

A complete application packet must include the following, please check the box to confirm you have included each piece.

Complete Application Form
Personal Statements
School Transcript(s); if part of transcripts, please provide secondaria certificate

By signing this form, I, the applicant, certify the accuracy of the information I have provided. Also, I authorize (1) OCF to share this information with scholarship staff, donors and selection committee members and (2) OCF or scholarship selection committee members to contact school officials for additional information, if needed.

Applicant Signature and Date

□ Publicity release: If selected to receive a scholarship, I give permission for a publicity release.

Please Submit Application Packet to:

Oleya Pearsall Oregon Community Foundation 1221 SW Yamhill, Suite 100 Portland, OR 97205 503.552.3515 opearsall@oregoncf.org

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