***APPLICATION INFORMATION***

***Email Address Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student # :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

|  |  |
| --- | --- |
| **First Name Middle Last** | **Social Security or ITIN#:**  **- -** |
| **Address:** | **Apt/House?** |
| **City, State**  | **Zip Code:** | **Home Phone:****Cell Phone:** |

***Education/High School***

|  |
| --- |
| **Last School Attended**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ADDRESS: **City State Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  |
| **Anticipated graduation date:** | **Current cumulative GPA:** | **Major:** |
| **If already registered for classes, how many credit hours?** |

***UNIVERSITY, COLLEGE OR TRADE SCHOOL INFORMATION***

|  |
| --- |
| Last School Attended:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: City: State: Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: Website: Contact: Phone#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tuition Balance: $ Email: Registered for 2024/2025 year? Anticipated Grad Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Anticipated graduation date:** | **Current cumulative GPA:** | **Major:** |
| **If already registered for classes, how many credit hours?** |

***Academics***

|  |
| --- |
| Academic Awards: |
| **Clubs/Organizations/Community Activities (Please be specific and indicate any office held):** |
|  |
|  |

***Work History*** *(Last three employers beginning with the most recent)*

|  |
| --- |
| **Employer Name:** |
| **Address:** | **Phone:** |
| Supervisor’s name: | From: | To: |

|  |
| --- |
| Employer Name: |
| Address: | Phone: |
| Supervisor’s name: | From: | To: |

|  |
| --- |
| Employer Name: |
| Address: | Phone: |
| Supervisor’s name: | From: | To: |

***Family Information***

|  |  |  |
| --- | --- | --- |
| Family Income: | # of Family members: | Are any of your family members (or will be) attending a College or University this year? |

**FAMILY INFORMATION**

*# in Household Head of Household Household Income*

*Name Relationship*

*Name Relationship*

*Name Relationship*

*Name Relationship*

*Name Relationship*

*Name Relationship*

*Name Relationship*

*Any questions please contact Irene Herrera at* **708-296-7006** *or email at hispanofest@yahoo.com*

**NOTE: All information provided is confidential and will be reviewed by the HispanoFest Scholarship Committee. Awardees will be notified by phone, email or mail. Scholarship funds are paid directly to the institution. By signing this document you agree that all the information provided is true and correct to the best of your knowledge.**

**Print Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Do not write below this line\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(For Office Use Only)

Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Received by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complete: \_\_\_\_ Incomplete/Missing: \_\_\_\_ Approved for review: \_\_\_\_ Denied for review (incomplete): \_\_\_\_\_\_