



Tulare County League of Mexican-American Women

Post Office Box 4453 • Visalia, California 93278

January 31, 2019

To: Tulare County Guidance Counselors and Scholarship Coordinators

*From: Tulare County League of Mexican American Women (TCLMAW)
Scholarship Committee Chairperson, Lillian E. Gurrola*

Re: 2019- 2020 Scholarship Applications

Enclosed you will find a copy of the TCLMAW 2019-2020 scholarship application form. Please distribute them to interested students on your campus. Feel free to copy additional forms as needed and post flyer where students will see it.

*All applications, including recommendation forms, must be **postmarked no later than March 31, 2019.** Your assistance in helping students complete the application process in a timely manner would be most appreciated.*

*Scholarship winners will be announced in April and the winners will be recognized at the TCLMAW scholarship presentation luncheon on **June 8, 2019.***

Any questions may be addressed to me at 559-562-4411. Thank you for your support and cooperation.

Enclosures



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SCHOLARSHIPS

*The Tulare County League of Mexican American Women is currently accepting scholarship applications. Scholarship winners will be notified in April 2019 and presented at the Scholarship Luncheon, **June 8, 2019.***

To be eligible for scholarship consideration, all applicants must meet the following criteria:

- 1. Must be a resident of or have a permanent address in Tulare County.*
- 2. Must be entering a post secondary institution for the 2019-2020 school year.*
- 3. Must have a minimum 2.5 grade point average.*
- 4. Must demonstrate financial need.*

Please note that a limited number of scholarships are available to re-entry women and TCLMAW members and their children.

To apply, all applicants must fulfill the above criteria, and submit the following:

- 1. Scholarship Application (page 3 attached).*
- 2. Financial Data & Family Background form (page 4 attached).*
- 3. Student autobiography (see page 2 attached).*
- 4. Two Scholarship Recommendations Forms (page 5 & 6 attached) enclosed in sealed envelope.*
- 5. Official high school or college transcripts.*
- 6. Courses currently in progress.*

Applications must be typed or printed.

*Application forms, transcripts and all other requested supporting documents must be **POSTMARKED BY MARCH 31, 2019,** and submitted to:*

*Attn: TCLMAW Scholarship Chairperson
P.O. Box 4453
Visalia, CA 93278*

APPLICANTS WILL BE DISQUALIFIED FOR CONSIDERATION, IF APPLICATION PACKET IS NOT COMPLETE AND POSTMARKED BY MARCH 31, 2019. LATE APPLICATIONS WILL NOT BE ACCEPTED.

Funded by the following partners.



Employees

AUTOBIOGRAPHY

Please attach a statement of your educational and career goals including reasons for your choice. Also provide any information about yourself that you feel free would be helpful in determining your eligibility to receive a scholarship. See the following of ideas on writing an autobiography.

TIPS ON WRITING AN AUTOBIOGRAPHY

- 1st Paragraph* *Introduce yourself. Share information about you, your family/ home life, special influences and work experiences. If you have not acquired any work experiences, it may be helpful to explain why.*
- 2nd Paragraph* *School performance – Discuss your involvement in academic studies, those areas you especially excel in: your grades and reasons for low grades, of any: and any extracurricular, leadership, volunteer activities that you have participated in, particularly those that have influenced you the greatest.*
- 3rd Paragraph* *College plans – Discuss your reasons for pursuing a college education; identify what you plan to study in college (major) and why you are selecting this field of study; you may also want to tell us why you selected the college(s) that you have.*
- 4th Paragraph* *Career plans- After completing your college education, describe your plans, i.e. jobs you plan to seek, where you plan to live, community/civic involvement's, etc.*
- 5th Paragraph* *Closing statement – Anything else that you think would be important for one to know about you, or reasons why you think you are worthy candidate for a scholarship.*

Type or Print: Applications with all required information must be postmarked by **March 31, 2019** and mailed to:
TCLMAW Scholarship Chairperson, P.O. Box 4453, Visalia, CA 93278

1. Name: _____
Last First Middle

2. Date of birth : ____ / ____ / ____ email _____

3. Mailing Address: _____
Street City State Zip

4. Telephone: _____ 5. Message Phone: _____

6. Current School Enrolled: _____

7. School Activities: (Sports, clubs, student government, etc. in which you have been an active participant).

8. Community Activities: (Civic, church/youth, volunteer, etc., in which you have been an active participant):

9 Past and Current Employment:

10. Are you a re-entry student? _____ Yes _____ No
Are you a TCLMAW member? _____ Yes _____ No
Are you a child of a TCLMAW member? _____ Yes _____ No
(Identify name of TCLMAW member). _____

11. What college will you be attending during the 2019-2020 school year? Please name the campus on the line next to the system of your choice.

Community College _____ California State University _____
University of California _____ Private College/University _____
Vocational/Technical _____

12. List you major: _____

This section must be completed by a school official.

Applicant's Grade Point Average: _____

Verified by school official: _____
Name Title

PLEASE NOTE APPLICATION WILL NOT BE CONSIDERED WITH UNANSWERED QUESTIONS

FAMILY

Estimated 2019 family income:
(Please check appropriate line.)

- _____ Under \$10,000.00
- _____ \$10,001.00-\$15,000.00
- _____ \$15,001.00-\$20,000.00
- _____ \$20,001.00-\$25,000.00
- _____ \$25,001.00-\$30,000.00
- _____ \$30,001.00-\$35,000.00
- _____ \$40,001.00-\$45,000.00
- _____ \$45,001.00-\$50,000.00
- _____ \$50,001.00 and up

INDEPENDENT

Estimated 2019 student (and spouse) income:
(Please check appropriate line.)

- _____ \$0
- _____ Under \$2,500.00
- _____ \$2,501.00-\$5,000.00
- _____ \$5,001.00-\$10,000.00
- _____ \$10,001.00 and up
- _____

FAMILY BACKGROUND

1. With whom do you currently live with? (Please fill in appropriate line.)

a. Parent: Name: _____ / _____
Father Occupation

_____ / _____
Mother Occupation

b. Guardian: Name: _____ / _____
Occupation

c. Other (Please specify) _____ / _____
Name Relationship

2. Do your parents currently support you? _____ Yes _____ No

If no, go to question 3

If yes, how many family members do your parents support financially? _____

How many family members live at home? _____

How many of your family members will be full time college students during 2019-2020? _____

3. How do you currently support yourself? _____

a. Do you support anyone else? _____ Yes _____ No If yes, who? (Please specify) _____

b. How many of the people you support will be full time college students during 2019-2020? _____

I hereby certify that the information presented on this application is accurate and to the best of my knowledge.

Applicant Signature

Date

Parent or Guardian Signature

Date

PLEASE NOTE APPLICATION WILL NOT BE CONSIDERED WITH UNANSWERED QUESTIONS

SCHOLARSHIP RECOMMENDATION FORM

(TYPE or PRINT)

Name of applicant: _____

School applicant is presently attending: _____

Your assessment of this applicant is of great importance, please respond to all questions.

1. How long have you known this applicant? _____

2. What is the basis for your recommendation? _____

_____ Classroom contact

_____ Personal knowledge

_____ Counseling relationship

_____ Supervisory relationship

_____ Extracurricular activities

_____ Other

3. What do you consider the applicant's most outstanding quality?

Please rate the applicant on the following:

4. ACADEMIC APTITUDE _____ Excellent _____ Good _____ Fair _____ Poor _____ Unsure

Comment: _____

5. MOTIVATION & INITIATIVE _____ Excellent _____ Good _____ Fair _____ Poor _____ Unsure

Comment: _____

6. Please make additional comments on the applicant regarding his/her worthiness for scholarship consideration (use backside for additional comments).

Completed by: _____
Signature

_____ Type Name

Title: _____ Phone: _____ Date: _____

This form must be **postmarked by March 31, 2019.** Please forward to: TCLMAW Scholarship Chairperson,
P.O. Box 4453, Visalia, CA 93278

This form must be included with application in sealed envelope.

PLEASE NOTE THAT THIS APPLICANT WILL NOT BE CONSIDERED WITHOUT THIS RECOMMENDATION FORM. THANK YOU FOR YOUR PROMPT COOPERATION.

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Comment: _____

5. MOTIVATION & INITIATIVE _____ Excellent _____ Good _____ Fair _____ Poor _____ Unsure

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