

Festa DO Santo Amaro, Inc.

20__ Scholarship Application



FESTA DO SANTO AMARO, INC. SCHOLARSHIP
20__ SCHOLARSHIP APPLICATION
FOR UNDERGRADUATES

The Festa Do Santo Amaro, Inc. is a non-profit fraternal organization composed of persons of Portuguese descent and family members. Among its purposes is that of furthering the education and welfare of persons of Portuguese descent, and of encouraging the continuation of the Portuguese traditional heritage and culture in the Portuguese community of San Diego. The Festa Do Santo Amaro, Inc. has organized a Scholarship Committee to assist with its educational, historical and literary work, and to receive and disperse donations for such purposes.

Eligibility Requirements:

The 20__ Festa Do Santo Amaro, Inc. Scholarship is a one-year non-renewable scholarship. The number and value of scholarship(s) offered is subject to available funding and the qualifications of the applicant pool, as determined by the Festa Do Santo Amaro, Inc. Board and Scholarship Committee. In order to be eligible for consideration for the 20__ Festa Do Santo Amaro, Inc. Scholarship you must meet the following criteria:

- Applicant must have a minimum grade point average of 2.5
- Applicant must be of Portuguese descent (verification may be required)
- Applicant must be a citizen or permanent resident of the United State
- Applicant must be a member of the high school graduating class of the year 20__
- Applicant, parents, or grandparents must be a member of Festa do Santo Amaro, Inc. for the preceding two years
- Applicant must reside in San Diego County
- **Applicant must be accepted to a four-year university or college**
- Applicant must submit a completed application postmarked by April __, 20__
- Priority will be given to Applicants who have demonstrated a commitment to the Portuguese community of San Diego

Selection Criteria

Scholarships will be awarded on a competitive basis. The Scholarship Committee in making the award determinations will consider the following criteria

- Scholastic achievements/Academic merit
- Involvement in the Portuguese community of San Diego
- Activity record, community service, leadership and character
- Personal statements
- Recommendations
- Essay about the Portuguese community of San Diego or the Festa Do Santo Amaro and its influence in the Portuguese community of San Diego
- Financial need

Application Process:

Complete application packets must be postmarked by April __, 20 __, and mailed to:

**Festa Do Santo Amaro, Inc.
Attn: Scholarship Committee
P.O. Box 6262
San Diego, Ca 92166-0262**

A complete application packet will include the following items:

- 1) The completed Application Form
- 2) The Applicant's sealed official high school transcript or a copy of the Applicant's official high school transcript with a letter certifying its authenticity and accuracy by a high school official. This should accompany the Application Form.
- 3) A letter of the Applicant's acceptance to a four-year college or university. This should accompany the Application Form.
- 4) Two letters of recommendations must be submitted on the Applicant's behalf. One of the letters of Recommendation must be from someone who will verify the Applicant's school activity record. The individuals completing the recommendation letters should submit the letters of recommendation to the Scholarship Committee. Both letters of recommendation must be postmarked by April __, 20__.

TO RECEIVE FULL CONSIDERATION FOR THE FESTA DO SANTO AMARO, INC. SCHOLARSHIP, APPLICANTS MUST SUBMIT COMPLETE APPLICATION PACKETS WITH A POSTMARK NO LATER THAN APRIL __, 20__.

Notice of Receipt of Application:

If you wish to be notified that the Scholarship Committee has received your application, please attach a stamped, self-addressed postcard to your application.

Notification of Award:

Only those Applicants who are awarded a scholarship will be notified.

Disbursement of Scholarship Funds:

Recipients must provide the Scholarship Committee with the name and address of the college/university they will be attending. Payment of scholarships awarded will be made directly to the institution specified by the scholarship recipient. Such disbursement will be made during the first quarter or semester of his/her first year of college.

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I: Background Information (please print clearly or type)

Applicant's name: (Last) _____ (First) _____ (Middle) _____

Home address:

Street Address _____

City _____ State _____ Zip Code _____

Home Phone: (_____) _____ - _____

Mailing Address: (Check if same as Home Address _____)

Street Address _____

City _____ State _____ Zip Code _____

Social Security Number: _____ Date of birth _____

Are you a citizen or permanent resident of the United States? Yes _____ No _____

Parents' information:

Father's name: _____

Mother's name: _____

Is your father of Portuguese descent? Yes _____ No _____

Is your mother of Portuguese descent? Yes _____ No _____

What area(s) of Portugal or its territories are your ancestors from? _____

Are your parents/grandparents members of the Festa Do Santo Amaro? Yes _____ No _____

Name and address of high school:

Expected date of high school graduation: _____

High school Grade Point Average _____ (If this is a weighted GPA mark here _____)

Name, title and telephone number of counselor or school official able to verify academic standing at high school:

SECTION II: Activity Record

Summarize your principal activities and extracurricular interests during high school, include any leadership positions held. Also, identify by name and title, and provide a daytime phone number of an individual (or individuals) that can verify your activity record.

(You may use additional sheets if necessary)

Summarize your community service. Also, identify by name and title, and provide the daytime phone of an individual (or individuals) that can verify your community service.

(You may use additional sheets if necessary.)

List any and all awards or honors you have received from your high school, community, or a public or private entity or agency.

(You may use additional sheets if necessary.)

Summarize your service to and involvement in the San Diego Portuguese Community.

(You may use additional sheets if necessary.)

List your current and prior employment experience.

(You may use additional sheets if necessary.)

Section V: Financial Information (optional)

What is your family income?

- ___ 0-\$9,999
- ___ \$10,000 - \$25,999
- ___ \$26,000-\$50,999
- ___ \$51,000-\$75,999
- ___ \$76,000 - \$99,999
- ___ Over \$100,000

How many children are in your family (including the Applicant)? _____

How many children in your family are currently enrolled in post high school education

(Including those enrolled in junior college, college or a university)? _____

What is the amount you will owe to the college/university per year \$_____

(You may find it helpful to use the worksheet below)

Tuition _____

Housing expenses _____

Books and supplies _____

Total expenses _____

Subtract student aid and awards toward university expenses _____

Total amount student will owe to the University _____

Provide or attach any additional information you believe the Scholarship Committee may find helpful.

Section VI: Recommendation Letters

Two letters of recommendation must be submitted on behalf of each Applicant. One of the letters of recommendation must be from a school representative such as a counselor, teacher, administrator, etc., and discuss the Applicant's scholastic achievements, school activity record, and/or character. The individuals completing the recommendation letters should send their letters of recommendation directly to the Santo Amaro Scholarship Committee at the address provided below. **Recommendation letters must be postmarked no later than April ___ 20__**

Identify below the two individuals you have requested to submit recommendations on your behalf.

Name _____ Title _____

Address _____

Daytime telephone number: _____

In what capacity does the Applicant know the individual completing the letter of recommendation?

Number of months/years Applicant has known the individual Completing the letter of recommendation?

Name _____ Title _____

Address _____

Daytime telephone number: _____

In what capacity does the Applicant know the individual completing the letter of recommendation?

Number of months/years Applicant has known the individual completing the letter of recommendation?

I certify that all of the information provided herein is, to the best of my knowledge, correct.

Applicant's Signature **X** _____ Dated _____

Questions or requests for additional scholarship applications should be addressed to:

**Festa Do Santo Amaro, Inc. Attn: Scholarship Committee
P.O. Box 6262 San Diego, Ca 92166-0262**