

U.P.S.E.S. Inc. Kenny Alameda Scholarship Scholarship

Qualifications and Application

The Kenny Alameda scholarship is a special scholarship available to all high school students of Portuguese descent graduating from a San Diego Catholic High School or Point Loma High School looking to pursue a college education.

Scholarship Available

One selected qualified candidate will be awarded \$1500.00

Eligibility Requirements

Applicant must be of Portuguese descent and reside in San Diego County

Applicant must attend a Catholic San Diego High School (Saint Augustine High School, Academy of Our Lady of Peace, Cathedral Catholic High School, Mater Dei High School) or Point Loma High School and in the graduating class of the current year.

Applicant must submit essay detailing why they are deserving of this award

Applicant must submit two letters of recommendation

Applicant must have 30 hours of community service within their community

Applicant must have a minimum GPA of 3.0

Applicant must be accepted to a four year institute but may attend a two year college. Applicant must submit a completed application postmarked by July 1

Selection Criteria

Scholastic Achievements/Academic Merit

Involvement in the Portuguese Community of San Diego

Activity record, community service, leadership and character

Personal statements and essay

Letters of recommendation

Application Process

Complete application packet must be postmarked by July 1st

Completed application must include the following:

- Completed Application form
- Proof of GPA (transcripts)
- Letter of acceptance
- Two letters of recommendation

Notification of Award

Only those applicants who are awarded a scholarship will be notified

Disbursement of Scholarship funds:

Recipients must provide the committee with the name and address of the College/University they will be attending. Payment of scholarship awarded will be made directly to the institution specified by the scholarship recipient. Disbursement will be made prior to starting date provided or no later than the U.P.S.E.S annual Contas meeting.

PLEASE ENSURE SURE THE FOLLOWING IS ATTACHED PRIOR TO MAILING:

- BACKGROUND INFORMATION
- ACTIVITY RECORD
- PERSONAL STATEMENT
- PORTUGUESE COMMUNITY ESSAY
- RECOMMENDATION LETTER INFORMATION
- PROOF OF GPA
- PROOF OF ACCEPTANCE/PROOF OF ENROLLMENT
- If the applicant is applying under the learning disability criteria, the applicant must provide proof of their learning disability from a qualified professional in the applicable field.

Background Information

Applicant name: _____

Date of Birth: _____ Phone number: _____

Email: _____

Are you a permanent resident of the United States? _____

Home Address: _____

Mailing Address: _____

Parent Information:

Father's name: _____ Is
your father of Portuguese Descent? Yes ___ No ___

Mother's name: _____
Is your Mother of Portuguese Descent? Yes ___ No ___

I certify that the information provided above is true and correct to the best of my knowledge. If the information is incorrect, the applicant with forfeit his/her scholarship if granted.

Applicant's signature: _____ Date: _____

Activity Record

Summarize your principal activities and extracurricular interests, including leadership positions held:

Summarize your community service:

List any awards or honors you have received from school, community or other agencies:

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

List your employment experience:

I certify that the information provided above is true and correct to the best of my knowledge. If the information is incorrect, the applicant with forfeit his/her scholarship if granted.

Applicant's signature: _____ Date: _____

Letters of Recommendation

Two letters of recommendation must be submitted on behalf of the applicant. The letters should include the applicant's achievements, activity record, leadership and character.

Names of individuals completing letter of recommendation:

Name: _____ Title: _____

Capacity that the applicant knows the individual completing the letter of recommendation?

Length of time the applicant has known the individual? _____

Name: _____ Title: _____

Capacity that the applicant knows the individual completing the letter of recommendation?

Length of time the applicant has known the individual? _____

I certify that the information provided above is true and correct to the best of my knowledge. If the information is incorrect, the applicant will forfeit his/her scholarship if granted.

Applicant's signature: _____ Date: _____