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|  |  **Lynn Hispanic Scholarship Fund, Inc.** 2020 Scholarship Application |  |

Thank you for your interest in applying for a scholarship from the Lynn Hispanic Scholarship Fund (LHSF). Please read the application carefully. If you have any questions, please send them to the following email address: **lynnscholarship@yahoo.com**or call Laura Sanchez at (781) 632-0236. To learn more about the LHSF, please visit our Facebook page: **LYNN Hispanic Scholarship Fund**

#### ELIGIBILITY CRITERIA

The LHSF will again award scholarships based on educational achievements and community involvement with the addition of the following categories for consideration:

* The Arts: For students with special talent(s) in the visual/performing arts.
* Athletics: For students with strengths in sports.
* STEM: For students with special talent(s) in the science, technology, engineering and/or mathematics fields.

**To be eligible to apply for the Lynn Hispanic Scholarship Fund you must meet all of the following criteria:**

* Be a senior graduating from a Lynn High School
* Be Hispanic or of Hispanic ancestry
* Be a resident of Lynn
* Be accepted at a two- or four-year accredited institution of higher education, as an undergraduate student

during the fiscal year following the grant award, in order to receive the scholarship

#### APPLICATION PROCEDURES

The LHSF awards financial scholarships per academic year to graduating Hispanic seniors from each of the Lynn high schools. It is essential that you meet the eligibility criteria and that you submit a completed application by the deadline. Please complete all parts of the application and ensure that all attachments contain your full name.

**Your completed application must be mailed to the LHSF address below and post-marked no later than May 1, 2020.** The LHSF is not responsible for mail lost or delayed by the postal system. No exception regarding the deadline will be made.

Applications will be screened by the LHSF and final selections will be made by the Lynn Hispanic Scholarship Fund Selection Committee. All decisions are final.

Checks to the students will be issued in September 2020, after the students send us proof of their college registration and class schedule.

#### APPLICATION REQUIREMENTS AND INSTRUCTIONS

❑ Submit: **ALL completed sections of the application.** Note that Section D, “Student Certification and Consent,” requires your signature and date, as well as the parent or guardian signature, if you are less than 18 years of age.

❑ Submit: **A 250-word essay**. Describe how your Hispanic ethnicity influences your educational aspirations and, by fulfilling them, how you will give back to your Lynn community. Be concise and incorporate your personal experience to develop your response. The essay must be typed double-spaced.

❑ Submit: **A high school transcript**. Submit a sealed transcript of your most recent academic grades.

❑ Submit: **A college** **acceptance letter**. Attach a copy of the acceptance letter from the college or university you hope to attend.

❑ Submit: **A** l**etter of recommendation**. Submit one letter of recommendation from a school official, a past or present employer, or a community leader.

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| **Your Scholarship Application must be post-marked by May 1, 2020****MAIL YOUR COMPLETED APPLICATION TO:****The Lynn Hispanic Scholarship Fund, Inc. P.O. Box 8280 Lynn, MA 01904** |

**\*Due to the coronavirus outbreak, we will accept applications from students and transcripts and recommendations from counselors and teachers directly to our email:** **lynnscholarship@yahoo.com****.**

##### PART I – LHSF SCHOLARSHIP APPLICATION

Print or type all sections

**A. PERSONAL**

Last Name First Name Middle Name or Initial

Home Address City State Zip

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Home or Cell Phone (Please Circle)

Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent 1/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent 2/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Indicate your Hispanic heritage: Birth Date: Month \_\_\_\_\_\_ Day \_\_\_\_\_\_ Year \_\_\_\_\_\_

❑ Caribbean (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

❑ North American (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City State Country

❑ Central American (Specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

❑ South American (Specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender: ❑Male ❑ Female

#### B. ACADEMIC

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School Name

High School Address

Graduation date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cumulative Grade Point Average (on 4.00 scale):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of College You Plan to Attend

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College Address

Start date: Summer 2020 \_\_\_ Fall 2020\_\_\_ Spr. 2021\_\_\_

Declared Major:

Anticipated Degree: ❑ AA ❑ AS

 ❑ Certificate

 ❑ BA ❑ BS

Anticipated graduation date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### C. EXTRA-CURRICULAR

List any academic/athletic/co-curricular activities, honors/awards:

**Activity Position/Leadership Grade(s) Involved Description**

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###### List and describe volunteer/community service activities/awards:

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**D. STUDENT CERTIFICATION AND CONSENT - Please Read, Sign, and Date**

I hereby certify that all the information contained in this application is true and accurate to the best of my knowledge. I hereby authorize the Lynn Hispanic Scholarship Fund (LHSF) to utilize any information, which I have submitted as part of this application. I further agree to permit the LHSF to utilize any information (**including the use of photos or video taken by the LHSF at the Awards Ceremony),** which I have submitted or will submit in the future, for the purpose of marketing and promoting the LHSF scholarship program or for referral and placement with internship opportunities. I understand and agree that the LHSF scholarship grant will be used solely for the payment of tuition, registration fees, textbooks and related educational costs at the institution where I will be enrolled as a student. I understand that if I use the LHSF scholarship grant for any purpose other than stated herein, or if the information I have submitted is found to be untrue or inaccurate, I will forfeit all grants awarded to me and agree to return the full amount of the grants received to-date to the LHSF.

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Applicant Signature Date

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Parent/Guardian Signature (if under 18 years old) Date