

# English Language Learning Foundation Inc.

*Helping English language learners become successful in their academic lives while fostering their cultural identities.*

## ELL Foundation Scholarship Application 2019

*All information in this application is confidential.*

The purpose of the English Language Learning Foundation Scholarship is to promote and foster educational opportunities for English language learners who have a desire to continue their higher education at area accredited colleges and universities. The Foundation will provide scholarships worth \$500- \$2,000 to deserving EL students for the 2019-2020 academic year. **All sections of this application must be completed in order to be considered for a scholarship.** Students may reapply annually for this scholarship. This application is due by **January 11<sup>th</sup>, 2019**. Applications will not be considered after the due date. All information on this form will remain confidential. Please type or print neatly.

### Eligibility Requirements

In order to be considered for the ELL Foundation Scholarship Program, the application must:

1. Be an English language learner (defined as students whose native or home language is not English);
2. Be a resident of the Greater Cincinnati area;
3. Have (1) applied and been accepted at an area college or university or (2) be an undergraduate student at a local college or university, or (3) enrolled in a two year community college program or in a trade program that when completed may result in a license or permit to practice in the given trade;
4. Have a minimum cumulative GPA of 2.5 on a 4.0 scale in high school/ college (or 3.5 on a 5.0 scale), or GED standard average score of 650 or higher;
5. Have completed 10 hours of community service during 2018 with a local nonprofit organization.

### Application Requirements

Please check each box to make sure you have included all of the application requirements. All of the items below must be submitted in order to be considered for a scholarship:

- This application completed in full;
- Community service validation form signed by a staff member from a local nonprofit (this form is included at the end of this application)
- An official high school/ college/ university/ GED transcript
- One letter of recommendation from a high school teacher, community leader, or college professor/ staff member
- An essay of no more than two pages, double spaced, addressing your heritage/ background, academic achievements, and personal qualities such as motivation, leadership, and potential for future success and contribution to the community
- A letter of acceptance to a college/ university (*for high school applicants only*).

### Selection Criteria

Scholarship applications will be evaluated using the following criteria:

1. Financial need and demographic information as demonstrated in this application;
2. Degree of community involvement, as seen in the community service validation form;
3. The quality of the essay;
4. The quality of the recommendation letter;

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### I. Personal Information

Applicant's full name: \_\_\_\_\_

Address (city/ state/ zip code): \_\_\_\_\_

Cell phone: \_\_\_\_\_ Home phone: \_\_\_\_\_

Primary email: \_\_\_\_\_ Secondary email: \_\_\_\_\_

Date of birth (month/ date/ year): \_\_\_\_\_

Birth place: \_\_\_\_\_  
City State Country

Race/ Ethnicity: \_\_\_\_\_

College/ university ID or last four of social security number: \_\_\_\_\_

High school name: \_\_\_\_\_

Year of high school graduation: \_\_\_\_\_

Number of family members in household: \_\_\_\_\_

Gross annual household income (*of those residing in the United States*): \_\_\_\_\_

Full parent(s)/ guardian(s) name(s): \_\_\_\_\_

Parent/ guardian's address: \_\_\_\_\_

Parent/ guardian's phone number: \_\_\_\_\_

Please check all that apply:

- |                                                                                                        |                                                                                                                 |
|--------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> First generation immigrant (you were not born in the United States)           | <input type="checkbox"/> Refugee status (I-94, I-9, other)                                                      |
| <input type="checkbox"/> Second generation immigrant (your parents were not born in the United States) | <input type="checkbox"/> DACA student                                                                           |
| <input type="checkbox"/> Citizen of the United States                                                  | <input type="checkbox"/> First generation college student (your parents did not graduate with a college degree) |
| <input type="checkbox"/> Lawful permanent resident of the United States                                | <input type="checkbox"/> Other: _____                                                                           |

### II. High School Seniors Only

Have you been admitted to a college or university?  Yes  No

If yes, please identify the college/ university: \_\_\_\_\_

### III. Current College Students Only

Name of college/ university: \_\_\_\_\_

Are you a full-time student?  Yes  No

Current status:  Freshman  Sophomore  Junior  Senior

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<b>IV. Special Circumstances</b>
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Please indicate any special circumstances which you feel will assist the selection committee in determining your eligibility that you have not addressed in your essay:

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I certify that the information in this application is accurate and complete to the best of my knowledge. I will notify the English Language Learning Foundation Inc. if there are any changes/ corrections that need to be made to this form.

Signature of applicant: \_\_\_\_\_

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

**This application is due by 01/11/2019.**

**Once you have completed this application, please mail to:**  
English Language Learning Foundation Inc.  
P.O. Box 19975  
Cincinnati, OH 45219

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### Community Service Validation Form

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I, \_\_\_\_\_, validate that \_\_\_\_\_ has  
(name of nonprofit representative) (scholarship applicant)

completed \_\_\_\_\_ hours of community service in 2018 with the following nonprofit organization:

\_\_\_\_\_.

Signature: \_\_\_\_\_

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