

## GAPASCA SCHOLARSHIP APPLICATION

The Scholarship Committee will only accept applications submitted to <a href="mailto:scholarship.gapasca@gmail.com">scholarship.gapasca@gmail.com</a>
You can find the form and other information at <a href="mailto:www.gapasca.org">www.gapasca.org</a>.

| officials of my instituticonsideration in the Good of | nd I wish to be considered for a contor release transcripts of release transcripts of release transcripts of release transcripts of release to need to see it in the course behalf. I agree to attend the lifornia. Further, I give GAF provided that are related to materials of GAPASCA Scholding the essay, is my own we | a Scholarship Merit any academic record and I understand that be of their duties. I was the GAPASCA Anniver PASCA permission to the course of my schlarship Program. | d conditions of the GAPASCA  Award. Permission is hereby giver and other requested information for this application will be available or live the right to access letters of resary and Induction Ball on June 2 use my pictures and personal holarship application, acceptance a | or<br>nly<br><b>23,</b> |  |  |
|---|---|--|---|-------------------------|--|--|
|   | he best of my knowledge and Signature   |  |   |                         |  |  |
| A. You, the Nomine  |   |  |   |                         |  |  |
| Legal name in full  |   |  |   |                         |  |  |
| -   | LAST  | FIRST  | MIDDLE NAME   |                         |  |  |
| Permanent Residence   | STREET AND NUMBER   |  |   |                         |  |  |
| family's primary reside<br>If you are selected as<br>2018 to:   | ·   | otification by mail AN   | D email. Send notification in May   | 27,                     |  |  |
| STREET AND NUMBER   |   |  |   |                         |  |  |
| CITY COUNTRY ZIP CO   | DDE:  |  |   |                         |  |  |
| BEST TELEPHONE:   |   |  |   |                         |  |  |
| BEST EMAIL ADDRESS  | 5:  |  |   |                         |  |  |
|   |   |  |   |                         |  |  |
| B. Your Family Back   |   |  |   |                         |  |  |
| Fath  | er: ( ) Living ( ) Deceased   | d Mother: (  | Living ( ) Deceased   |                         |  |  |
| Name:   |   |  |   |                         |  |  |
| Address:  |   |  |   |                         |  |  |
|   |   |  |   |                         |  |  |
| Occupation:   |   |  |   |                         |  |  |
| Educational   |   |  |   |                         |  |  |

## **C. Your Aspirations**

| 1.   | In one or two sentences,                                 | , describ  | e your career goal:                          | (Limit 1000 chara                       | acters with | spaces)                    |
|------|--|------------|--|---|-------------|----------------------------|
|      |  |            |  |   |             |                            |
|      |  |            |  |   |             |                            |
|      |  |            |  |   |             |                            |
|      | <u> </u>   |            |  |   |             |                            |
|      | What are your profession ns will assist you in achie     |            |  |   |             | d your overall educational |
|      |  |            |  |   |             |                            |
|      |  |            |  |   |             |                            |
|      |  |            |  |   |             |                            |
|      |  |            |  |   |             |                            |
| D.   | Your Schooling   |            |  |   |             |                            |
| Wh   | at school are you current                                | tly enroll | led in?                                      |   |             |                            |
| Wh   | ich year are you in the cເ                               | urrent ac  | cademic year?                                |   |             |                            |
| Wh   | at is your Grade Point Av                                | /erage ((  | GPA)?  |   |             |                            |
| Nar  | me of Principal and conta                                | ct inforn  | nation:                                      |   |             |                            |
|      | Beginning with the school uding any for summer or        |            |  |   |             | e last four years,         |
|      | SCHOOL   | LO         | CATION                                       | ATION DATES ATTENDED                    |             | GPA                        |
| 1.   |  |            |  |   |             |                            |
| 2.   |  |            |  |   |             |                            |
| 3.   |  |            |  |   |             |                            |
| 4.   |  |            |  |   |             |                            |
| 2. L | List any awards, honors, c<br>cending order of significa | or schola  | arships you have red<br>u will have space to | ceived in the past<br>list up to 6 awar | four years  | s. Please list in          |
|      | NAME   |            | DATE   |   |             | DESCRIPTION                |
| 1.   |  |            |  |   |             |                            |
| 2.   |  |            |  |   |             |                            |
| 3.   |  |            |  |   |             |                            |
| 4.   |  |            |  |   |             |                            |
| 5.   |  |            |  |   |             |                            |
| 6.   |  |            |  |   |             |                            |

## E. Your Programs and Activities

1. List any programs and activities in which you have participated on campus or in your community while in school (such as clubs, publications, debate, dramatics, music, art, student government...). Please list in descending order of significance. You will have space to list up to 6 high school activities.

| descending order of signif                                       |                 | •              |                     | i scriour aci |                                       |
|--|-----------------|----------------|---------------------|---------------|---------------------------------------|
| HIGH SCHOOL AC   | CTIVITY         | DESCRIPTI      | ON/OFFICE HELD      |               | DATES PARTICIPATED                    |
| 2  |                 |                |                     |               |                                       |
| 2.   |                 |                |                     |               |                                       |
| 3.   |                 |                |                     |               |                                       |
| 4.   |                 |                |                     |               |                                       |
| 5.   |                 |                |                     |               |                                       |
| 2. List internships, assista years. You will have space          | e to list up to | 6 employers.   |                     |               | ·                                     |
| JOB & KIND OF WORK  1.   | EMPL            | OYER           | DATES OF EMPL       | LOTIMENT      | HOURS/WK                              |
| 2.   |                 |                |                     |               |                                       |
| 3.   |                 |                |                     |               |                                       |
| 4.   |                 |                |                     |               |                                       |
|  |                 |                |                     |               |                                       |
| 5.   |                 |                |                     |               |                                       |
| List public service and descending order of significant ACTIVITY |                 | ill have space |                     |               | ly. Please list in #WEEKS/TOTAL HOURS |
| 1.   | I INO           | <u></u>        | DATES               | ,             | "WEEKS/TOTAL HOOKS                    |
| 2.   |                 |                |                     |               |                                       |
| 3.   |                 |                |                     |               |                                       |
| 4.   |                 |                |                     |               |                                       |
|  |                 |                |                     |               |                                       |
| 5.   |                 |                |                     |               |                                       |
|  |                 |                | d - d:66            |               |                                       |
| 4. Describe a leadership of 2400 characters with space           |                 | which you ma   | ide a difference on | campus or     | in your community (limit              |
|  |                 | which you ma   | ide a difference on | campus or     | in your community (limit              |
|  |                 | which you ma   | ide a difference on | campus or     | in your community (limit              |
|  |                 | which you ma   | de a difference on  | campus or     | in your community (limit              |
|  |                 | which you ma   | ide a difference on | campus or     | in your community (limit              |
|  |                 | which you ma   | de a difference on  | campus or     | in your community (limit              |

| commitment to your                        |  |               |             |                     | or strengthening your<br>s) |  |
|---|--|---------------|-------------|---------------------|-----------------------------|--|
| commence to your                          | chosen career or voc                   | acioni (Linne | 1000 Char   | decero men opace.   | • )                         |  |
|   |  |               |             |                     |                             |  |
|   |  |               |             |                     |                             |  |
|   |  |               |             |                     |                             |  |
|   |  |               |             |                     |                             |  |
|   |  |               |             |                     |                             |  |
|   |  |               |             |                     |                             |  |
|   |  |               |             |                     |                             |  |
|   |  |               |             |                     |                             |  |
| 6. What additional ir GAPASCA Scholarship |  |               |             |                     | vish to share with the      |  |
|   |  | ,             |             | <b>/</b>            |                             |  |
|   |  |               |             |                     |                             |  |
|   |  |               |             |                     |                             |  |
|   |  |               |             |                     |                             |  |
|   |  |               |             |                     |                             |  |
|   |  |               |             |                     |                             |  |
|   |  |               |             |                     |                             |  |
| 7. List the colleges of                   | r universities you inte                | end to enroll | in (you wi  | ll have space to li | st 3 schools)               |  |
| SCHOOL                                    | ADDRE                                  | ESS           | PUBLIC      | OR PRIVATE          | COURSE/MAJOR                |  |
| 1.  |  |               |             |                     | <b>,</b>                    |  |
| 2.  |  |               |             |                     |                             |  |
| ۷.  |  |               |             |                     |                             |  |
| 3.  |  |               |             |                     |                             |  |
|   |  |               |             |                     |                             |  |
|   |  |               |             |                     |                             |  |
| F. Essay (att                             | ach in a separ                         | ate pap       | er)         |                     |                             |  |
| 11 2000) (400                             | acii iii a sepai                       | ate pap       | <b>.</b> ,  |                     |                             |  |
|   |  | public perso  | n, event, a | ctivity or public p | olicy and its impact on     |  |
| your life, interests ar                   | your life, interests and career goals. |               |             |                     |                             |  |
| G. List names of in                       | dividuals who know                     | , you perso   | nally and   | would be willing    | g to provide a              |  |
| recommendation o                          | n your behalf:                         |               |             |                     |                             |  |
| Name                                      | Address                                | Telepho       | ne #        | Email Address       | Reference Type              |  |
| 1.  | 71441 000                              | , cicpilo     |             | Ziliali riddi C33   | Tereference Type            |  |
|   |  |               |             |                     |                             |  |
| 2.  |  |               |             |                     |                             |  |
| 2   |  |               |             |                     |                             |  |
| 3.  |  |               |             |                     |                             |  |
| 4.  |  |               |             |                     |                             |  |
| 1   |  | -             |             | 1                   | 1                           |  |

## SUBMISSION CHECKLIST

Application for Scholarship Merit Award

Check each box for documents submitted. Send this completed Checklist with your application. Incomplete applications or applications with information not meeting the eligibility requirements will not be considered for review.

| Completed GAPASCA Scholarship Application Form  |
|---|
| Certified copy of high school report card for third year and fourth year grading period prior to December 1 <sup>st</sup> |
| Essay   |
| Recommendation letters (in sealed envelope or mail directly to GAPASCA)   |