

Oregon Trail Community Foundation P.O. Box 1344, 115 Railway Street, Scottsbluff, NE 69361

HISPANIC ADVISORY COMMITTEE SCHOLARSHIP CRITERIA

For Scotts Bluff County Residents of Hispanic Heritage

Scholarships will be given annually to Scotts Bluff County residents of Hispanic heritage to pursue undergraduate education. Scholarships are available to high school graduates and undergraduate college students. The number and value of scholarships will vary based on annual Hispanic Advisory Committee scholarship resources. Scholarships may be renewable.

To qualify for the Hispanic Advisory Committee Scholarship, students must:

- ➤ Be a United States citizen
- ➤ Have at least one parent of Hispanic descent.
- ➤ Be a Scotts Bluff County resident or a graduate of an accredited Scotts Bluff County high school.
- ➤ Be a graduating high school senior or college undergraduate who has not completed a Bachelor's degree.
- ➤ High school applicants must enroll full-time for their first semester of college.
- ➤ College applicants must currently be enrolled in twelve (12) semester hours or eighteen (18) quarter hours at an accredited college or university.
- ➤ GED applicants must have completed nine (9) semester hours of college-level work and have verification of the GED certificate.

Deadline for application and supporting documents is February 15th at 5 p.m. Downloadable application forms are available online at www.otcf.org or from the Oregon Trail Community Foundation office. For more information call (308) 635-3393.

Applicant must:

- > Legibly complete and sign the application
- > Attach two (2) letters of recommendation
- Attach a personal essay written and signed by the student
- > Attach a copy of their official ACT/SAT and high school or current college transcript (final grades for high school senior year are not required)



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HISPANIC ADVISORY COMMITTEE SCHOLARSHIP APPLICATION

FOR HIGH SCHOOL APPLICANTS

Applicants must submit application and all supporting information to the Oregon Trail Community Foundation, PO Box 1344, Scottsbluff, NE 69361 in an organized, readable form. *If it is not received by February 15th at 5 p.m.*, *the application will not be reviewed*. Attach copy of official ACT/SAT, high school or GED transcript, personal essay, and two letters of recommendation. Final grades for senior year are not required to apply.

Applicant's Full Name _						
Address	City		Sta	te	Zip Code	
Phone #		E-mail Ac	ldress			
Date of Birth		Place of B	irth			
U.S. Citizenship: Yes	No	No If naturalized, date of naturalization				
Last 4 digits of Social Sec	urity #					
ETHNIC I	BACKGROUN	D: ONE PARE	NT MUST BE OF	HISPANIO	C DESCENT	
Mexican American	_ Mexican	Cuban	Puerto Rican	Othe	er	
Mother's Maiden Name			Occup	ation		
Spouse's Name	O			ation		
Address	City		Sta	te	Zip Code	
Phone #		E-mail Ac	ldress			
Father's Name		Occupation				
Address	City		Sta	te	Zip Code	
Number of family living a	t home	Nu	umber of family atter	nding colle	ege	
High School Name		Town				
Year of High School Grad	uation	Antio	cipated Year of Coll	ege Gradu	ation	
GPA Class Ran	k# (of Students in Cl	ass GED	Score	Other	
	ACT	Score	SAT Score			
Signature of Counselor or	Principal				Date	
College, university, or tech	hnical school y	ou plan to attend	l. Attach college admi	ssion confi	rmation. Provide office and	
telephone number of the scho	ool and, if possib	le, name of a cont	act person at the scho	ol.		
Address						
				Z	Cip Code	

In what subject do you plan to major?		
School-related activities including athle	etics, music, student government, etc.:	
Community-related activities including	g clubs, church groups, volunteer work, etc.:	
Work experience:		
Academic honors:		
Please check if you have been awarded	the coming academic year? Yes No I the following: Regent's Scholarship Other ed, please indicate with an asterisk any you have	er Full-Tuition Scholarship
, ,	chool official and non-relative community memb	
Reference's Name 1	Relationship to Applicant	Phone #
 Hispanic parentage and family Financial need for this scholars Career goals How you plan to help the Hisp 	ship	
Committee permission to share this information	and complete to the best of my knowledge. I hereby givation for the purpose of recruitment, public relations belied as a college student for the upcoming academic ance at my designated school.	s, and research. I further certify
Signature:	Date	