



## **2019 SCHOLARSHIP APPLICATION**

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### **Important Dates to Remember**

**September 15, 2019** - Application Deadline

**September 23, 2019** - Selection & Announcement

**October 2018** – Scholarship & Awards Dinner



## 2019 Scholarship Application

### **Southeast Dallas Hispanic Chamber (SEDHCC) Eastfield College Pleasant Grove Campus Scholarship Awards**

Students in Pleasant Grove will have an opportunity to begin or continue their college education at the Eastfield College Pleasant Grove Campus for subsequent fall semester. Scholarships are being funded by corporate supporters and members of the Southeast Dallas Hispanic Chamber of Commerce.

Scholarships will assist students pursuing studies for college credit, continuing education, and adult education. Scholarships will support the student's college experience by providing funding for one year of college. In addition, students will be assisted with career planning and academic excellence through a mentoring program facilitated by the Southeast Dallas Hispanic Chamber of Commerce (SEDHCC) membership.

#### **Awards**

Scholarships will be awarded to students enrolling for the spring or fall 2020 semesters at the Eastfield College Pleasant Grove Campus. The scholarships will be awarded in the following student categories:

- College Credit
- Continuing Education

#### **Criteria**

All scholarships must meet the following Southeast Dallas Hispanic Chamber of Commerce (SEDHCC) criteria:

- Resident of the Pleasant Grove neighborhood living in the Greater Southeast Dallas neighborhood (Mesquite, Balch Springs, Seagoville, etc.)
- Plan to enroll for subsequent fall semester at the EFC Pleasant Grove Campus

#### **Application Deadline is Friday, September 15, 2019**

The application will include the following items:

- A completed application form
- Two letters of recommendation
- Personal statement (include an essay in English or Spanish), no more than one page addressing the following factors: socio-economic background, career goals, family and financial responsibilities and other factors that can be considered obstacles in attending college

#### **Submit Application and documents to the following address:**

Southeast Dallas Hispanic Chamber of Commerce  
Attention: Education Committee  
802 South Buckner Boulevard  
Dallas, Texas 75217



**2019 Scholarship Application**

**Southeast Dallas Hispanic Chamber of Commerce  
Scholarship Application**

**Note: Please type or print legibly with black ink. Attach the most current copy of your transcript with rank in class and a graduation or professional photo. If applying as a college student, submit copy of transcript with cumulative GPA and a photo.**

**Personal Data:**

School type:  Public School  Private School  Charter School  Home School

I will be applying as a:  College Freshman  Continuing College Student  Graduate Student

Are you the first in your immediate family to go to college?  Yes  No

Name (Last, First, Middle) \_\_\_\_\_

Male  Female Date of Birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Current Age: \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Applicant's Phone \_\_\_\_\_ High School/College: \_\_\_\_\_

Previous High School Attended: \_\_\_\_\_

High School Class Rank \_\_\_\_\_ out of \_\_\_\_\_ GPA \_\_\_\_\_ Graduation Date \_\_\_\_\_

**Complete parent information if applying as a dependent student:**

**Father's Name** \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

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

**Mother's Name** \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

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

**Father's place of employment/occupation/income:**

Company \_\_\_\_\_ How long? \_\_\_\_\_

Position \_\_\_\_\_ Annual income \_\_\_\_\_

Other income amount \_\_\_\_\_ and source \_\_\_\_\_

Do you receive financial support from only one parent/step-parent/guardian?  Yes  No

If more than one how many? \_\_\_\_\_ Amount? \_\_\_\_\_



**2019 Scholarship Application**

**Mother's place of employment/occupation/income:**

Company \_\_\_\_\_ How long? \_\_\_\_\_

Position \_\_\_\_\_ Annual income \_\_\_\_\_

Other income amount \_\_\_\_\_ and source \_\_\_\_\_

Do you receive financial support from only one parent/step-parent/guardian?  Yes  No

If more than one how many? \_\_\_\_\_ Amount? \_\_\_\_\_

**Student's Name:** \_\_\_\_\_

Other persons financially dependent on your parents/guardians: (Brothers, Sisters, Grandparents, Aunts, Uncles, etc.)

Name Age Relationship to Applicant Living at home School

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Applicant's Employment Record:** (List current and previous employment)

Employment Dates per week \_\_\_\_\_ Employer \_\_\_\_\_

Job Duties \_\_\_\_\_ Hours per Week \_\_\_\_\_

Applicant's parents:  Own home  Rent

How much money can your parents contribute annually toward your college education? \_\_\_\_\_

How much money do you have saved or will you contribute for your education? \_\_\_\_\_

Do you work part-time or plan to work part-time while attending college?  Yes  No

(If yes, indicate hours per week.) \_\_\_\_\_

**Educational data:**

(Please attach a separate sheet of paper if needed to complete the following information.)

List in order of preference all colleges and universities to which you have applied and to which you have been admitted?

Applied to or admitted to: \_\_\_\_\_

\_\_\_\_\_

Tuition/Fees \_\_\_\_\_ Room and Board Other \_\_\_\_\_



**2019 Scholarship Application**

Major or Anticipated Major: \_\_\_\_\_

**How do you plan to meet your college costs?**

Please be specific. \_\_\_\_\_

Do you plan to apply for a loan? [ ] Yes [ ] No

Have you submitted a Financial Aid Form? [ ] Yes [ ] No

**Student Name** \_\_\_\_\_

Have you applied for/or received any other scholarships? [ ] Yes [ ] No

(Please attach a separate sheet if needed to complete the information.)

Name of Scholarship/Sponsor Amount One Time or Renewable Applied Received Notification Date

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

**List high school or college related extra-curricular activities:**

Activity Date from \_\_\_\_\_ to \_\_\_\_\_ Position Responsibility

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

**List church and community extra-curricular activities in order of importance to you:**

Activity Date from \_\_\_\_\_ to \_\_\_\_\_ Position Responsibility

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

**Indicate your participation in honors programs, advanced placement (AP) courses, and/or IB**

List honors, awards, and dates of special recognitions you have received:

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

Please answer the questions below on a separate sheet of paper.

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



**2019 Scholarship Application**

1. **ESSAY:** Describe your reasons for pursuing higher education and your interest in your chosen area of study. Discuss what you know about yourself that will help you to be successful and self sufficient in college and in your career.

2. (Optional) Is there anything not included on this application, such as unusual circumstances which may have affected your achievements and that you would like the scholarship selection committee to consider?

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3. (Optional) Please provide a message of inspiration or words of wisdom.

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**Student Name** \_\_\_\_\_

**Applicant/Guardian (if student is dependent) Approval: In case of emergency contact:**

The statements in this application are true and complete to the best of my knowledge.

**Relationship to Applicant Name:** \_\_\_\_\_

**Student's Signature** \_\_\_\_\_ **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Guardian's signature** \_\_\_\_\_ **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Day Phone** \_\_\_\_\_ **Night Phone** \_\_\_\_\_

**THANK YOU ON BEHALF OF  
THE SOUTHEAST DALLAS HISPANIC CHAMBER OF COMMERCE**