



NORTH CAROLINA HISPANIC COLLEGE FUND

North Carolina Society of Hispanic Professionals
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The NC Hispanic College Fund of Triangle Community Foundation established by the NC Society of Hispanic Professionals awards annual scholarships, worth between \$500 and \$2500. These scholarships are awarded to recent graduates of North Carolina High Schools who are of Hispanic/Latino background. Winners of a NC Hispanic College Fund scholarship must enroll in a degree program at a community college or a 2- or 4- year college/university and be committed to public service and community development.

Important Dates

Application packages are available all year. They can be obtained by writing or calling the NCSHP or by downloading an application from the Internet. Final applications, however, must be received by January 15th of each year. Award announcements will be mailed by April 1st.

Scholarship Disbursement

All scholarship awards will be sent directly to the college or university where the recipient enrolls. For scholarships under \$1000, one payment will be made in the fall semester. For scholarships over \$1000, one-half of the scholarship will be paid in the fall semester and one-half will be paid in the spring semester. Scholarship funds will be designated for tuition, room and board. If these expenses have already been met, the award will be placed into an account at the educational institution, for use by the student as needed.

Eligibility Criteria

- Applicant is of Hispanic background (one parent must be fully Hispanic or both parents must be half Hispanic).
- Applicant is a graduate of a NC high school within the past 2 years
- Applicant has a four-year cumulative GPA of 2.5 or better on a 4.0 scale (3.5 on a 5.0 scale).

Selection Criteria

Please submit the following items in one sealed envelope to the NCSHP by January 15th, 2009. Packets postmarked after the 15th of January will not be accepted. Please do not fax or email applications.

- **2 letters of recommendation:** Please submit 2 letters of recommendation from a pastor, high school teacher, principal, employer or other community leader who can discuss:
 1. Current academic status
 2. Academic and extracurricular achievements
 3. Personal qualities such as motivation, commitment, and leadership
 4. Potential for success and contributions to your community
 5. Financial need
- **An official high school transcript:** Please make certain that your cumulative GPA is included on your transcript. If your transcript does not include this, please have a school official confirm on school letterhead with his/her signature, your total cumulative GPA on a 4- point scale.
- **Personal statement:** An essay of 500 words addressing briefly each of the following topics:
 1. Describe why Hispanic parentage and family background are important to you.
 2. Describe any meaningful personal and/or academic achievements that you have had and why this achievement was important to you.
 3. Describe your academic plans and career goals, giving specific examples.
 4. Describe past and current efforts, as well as future plans, towards making a difference in your community.

The Personal statement is one of the most important selection criteria. It should be written with care and solely for the NC Hispanic College Fund. Please note that personal and professional qualities and community involvement are considered in evaluating your personal statement. Title your essay Personal Statement but do not use a separate cover sheet.

Additional Considerations

- Preference will be given to students who enroll full-time. However, part-time students are encouraged to apply.
- Preference will be given to foreign-born applicants or the native born children of foreign-born parents.
- Previous involvement in a club or community organization is encouraged.
- Semi-finalists for all scholarships will be asked to have a personal interview by phone with one or more members of the selection committee.

THE ISABELLA CARVALHO HEALTH SCHOLARSHIP

The Isabella Carvalho Health Scholarship was established through the NC Hispanic College Fund at Triangle Community Foundation. These scholarships will be given to Latino/a students who have expressed an interest in going into a **field related to health care including but not limited to medicine, nursing, public health, pharmacy, dentistry, sports medicine or allied health**. The scholarship can be used to attend a community college, or a four year college or university. The recipients of this scholarship can also be considered for a scholarship from the NC Hispanic College Fund. Preference will be given to female applicants. This scholarship is renewable for up to two years, but preference will be given to new applicants. Recipients are required to keep in touch with the donor and must send an annual letter updating the donor on his/her progress. *No Separate Application Required.*

MAILING INSTRUCTIONS

Unfold and Remove all staples from all materials you send.

Answer all questions neatly using black or dark blue ink or type for legibility.

Make sure your application packet is complete and includes all requested materials:

- Transcript(s) with cumulative GPA
- Letters of Recommendation
- Personal Statement
- Federal Tax Return(s).

Return ONLY pages 3, 4, 5, 6, & 7 of this application.

Do not FAX or e-mail applications, nor enclose any materials not requested (articles, photos, etc.).

Write your full name on each document you submit.

Submit all documents on white 8 ½" x 11" paper (except for official transcripts or recommendations on letterhead).

Mail complete application in a single large envelope, POSTMARKED no later than January 15th, 2009 to:

NC Society of Hispanic Professionals
NC Hispanic College Fund
8450 Chapel Hill Road, Suite 209
Cary, NC 27513

Include a stamped envelope, addressed to you, for acknowledgement that we have received your packet. Award notification will be sent to your mailing address by April 1, 2010. Incomplete applications and applications that do not follow instructions will not be considered. No pre-award notices can be made. Please report any changes, including address changes, by e-mail to mailbox@TheNCSHP.org. Thank you for applying to the NC Hispanic College Fund. We wish you success!



**2010-2011 NC Hispanic College Fund
APPLICATION FORM**

ELIGIBILITY QUESTIONS (please circle or write in appropriate response):

- 1) Are you of Hispanic heritage (one parent fully Hispanic or both parents half Hispanic)?
Yes No
- 2) Will you be an entering freshman for the 2010-2011 academic year?
Yes No
- 3) Do you have a minimum cumulative High School GPA of 2.5 on a 4.0 scale or 3.5 on a 5.0 scale)?
Yes No
- 4) Are you a permanent resident of the state of North Carolina? Yes No
- 5) Gender: Male Female
- 6) Social Security # _____ - _____ - _____ **(optional; omitting your social security will not affect the review of your application)**
- 7) Full name: _____
- 8) Mailing Address:

Home Phone: _____ Cell Phone: _____
Email: _____
- 9) Permanent Address (If the same as above, please write "same"):

Phone: _____ 2nd Email: _____
- 10) Date of Birth: _____
- 11) Country of Birth: _____
- 12) Hispanic Heritage: _____
 Cuban
 Central American
 Dominican
 Mexican
 Puerto Rican
 South American
 Spanish
- 13) Did either of your parents ever attend college? Yes No

14) College(s) you have applied to for the fall of 2010 (please include city and state if not NC):

College/University 1: _____

College/University 2: _____

15) Field of Study: _____

Expected Major: _____

Career Goal: _____

16) Do you plan to be enrolled in a university approved 4-year undergraduate program?

Yes No

17) Do you plan to be enrolled in a 2-year degree program at an accredited university or community college?

Yes No

18) Expected graduation: Month/Year _____ Expected Degree: _____

19) Total college units (credits) earned to date: _____

20) Will you be a FULL-TIME student (at least 12 credit hours) for the entire academic year? Yes No

21) Will you be a PART-TIME student (less than 12 credit hours) for the entire academic year?

Yes No

From time to time, we may need to communicate with your parents. Please indicate what language your parents prefer.

22) Mother/Legal Guardian: English Spanish

23) Father/Legal Guardian: English Spanish

Please check this box if you would like to apply for the **Isabella Carvalho Health Scholarship**.

This scholarship will be given to Latino/a students who have expressed an interest in going into a field related to health care including but not limited to medicine, nursing, public health, pharmacy, dentistry, sports medicine or allied health. The scholarship can be used to attend a community college, four year college or university. The recipients of this scholarship can also be considered for a scholarship from the NC Hispanic College Fund. Preference will be given to female applicants. This scholarship is renewable for up to two years, but preference will be given to new applicants. Recipients are required to keep in touch with the donor and must send an annual letter updating the donor on his/her progress. *No Separate Application Required.*

Important: Selecting to apply for the above scholarship will not disqualify you from receiving a NC Hispanic College Fund Scholarship.

FAMILY FINANCIAL STATEMENT

- 24) Father's Occupation _____
Mother's Occupation _____
- 25) Parent(s)' marital status: Married Single Separated
- 26) Number of dependents your parent(s) support 50% or more (including yourself): _____
- 27) Your marital status: Married Single Separated
- 28) Number of dependents you support 50% or more: _____ (do not include your spouse or yourself)
- 29) Expected student gross annual income for 2010-2011 \$ _____
- 30) If you are married, your spouse's occupation _____
- 31) Are you supported by your parent(s) 50% or more, or do you live with them?
Yes No
- 32) 2010-2011 annual TUITION (exclude room and board) : \$ _____
- 33) Your age _____
- 34) Entire family income is required for consideration; do not leave a line blank.
Please put a zero (0) if no income was received.

2009 (last year's) ANNUAL Family Income:	\$ _____
Father's Gross Annual Income	\$ _____
Mother's Gross Annual Income	\$ _____
Student's Gross Annual Income	\$ _____
Spouse's Gross Annual Income	\$ _____
Social Security or Disability	\$ _____
TANF or Public Assistance	\$ _____
Child Support, Alimony	\$ _____
Other Income (specify) _____	\$ _____
Personal Loans, Gifts, etc.	\$ _____
Savings/Investments (e.g., stocks, bonds)	\$ _____
TOTAL <u>2009</u> GROSS INCOME	\$ _____

- 35) Did you or your parents submit a federal tax return last year?
Yes No
- If 'Yes', please submit a copy of your 2009 or last submitted Federal Tax Return (and spouse's if married) and your parent(s)' if under 24 and single.***

36) Estimate of 2010-2011 ANNUAL Year Resources (if applicable):

Note: Please leave fields black if you are not receiving any resources from that source.

School Scholarships & Tuition Waivers	\$ _____
Other Outside Scholarships and Waivers	\$ _____
Annual Student Loans	\$ _____
Annual Work-study	\$ _____
Annual Assistantship/Fellowships	\$ _____
Annual JTPA or PIC Benefits	\$ _____
Annual Veterans Benefits	\$ _____
Annual Pell Grant	\$ _____
Other Grants (annual)	\$ _____
TOTAL PROJECTED RESOURCES	\$ _____

If total income is less than \$6,000 per-year, please specify funding sources, with amounts, that allow you to live daily:

Please explain any significant income changes within the last year, or any extremely unusual expenses (please specify):

LEAVE BLANK - for internal NCSHP use only!

- L
 - M
 - H
 - Dependent
 - Independent
- Cumulative GPA = _____
EFC = _____
in Family _____ w/ Income \$ _____

CERTIFICATION: Student must read and SIGN BELOW to be eligible for consideration.

- I give my college consent to release to the NC Hispanic College Fund all information pertaining to this application package including: GPA, enrollment, financial, and contact information.
- I certify that all the information provided is complete and accurate to the best of my knowledge.
- I understand that falsification of information may result in termination of any scholarship granted.
- I certify that I plan to be enrolled as a part-time or full-time student for the 2010-2011 academic year.
- I certify that I am at least half Hispanic (i.e. one of my biological parents is Hispanic).
- I authorize the NCSHP to share or publish my GPA and other application information for the purpose of recruitment, public relations, or possible employment.
- I may receive only one NC Hispanic College Fund award for each academic year.
- I understand that I must e-mail any changes to mailbox@TheNCSHP.org in full-time status may result in award cancellation.
- I understand that all award decisions and notifications are final and exceptions cannot be made.
- I understand that application materials become the property of the NCHCF and cannot be returned.
- I understand that any scholarship funds awarded to me will be distributed directly to the university or college that I am enrolled in.
- I understand that applicants and their relatives are barred from advocating with the selection committee members. Doing so may result in an automatic removal from consideration for a NC Hispanic College Fund scholarship.
- I understand that incomplete and late application materials will result in ineligibility and exceptions cannot be made.
- I understand that I must reapply each year with no guarantee of renewal.
- I certify that I have read this application and certification and accept all conditions.

Student's signature _____ Date _____

Parent/Guardian's Signature _____ Date _____
(if student is under 18 years old)