

ASSIST-A-GRAD

APPLICATION PACKET and INSTRUCTIONS

1. TYPE or PRINT in **BLACK INK** ! (or complete on the Web Site)
2. BE SURE TO **SIGN** the "Personal Statement" on the back of the first page of the application.
3. TYPE or PRINT the separate **APPLICATION BRIEF** form. **MAKE 3 COPIES.**
FOUR COPIES of the Application Brief must be submitted with the Assist-A-Grad application.
4. All GPA's should be figured on a 4.00 unweighted/academic scale.
5. SUGGESTED Letters of Recommendation are included but other formats will be accepted.
6. Complete the entire application packet, **including any additional essay** or requirement. Essays in addition to the required "Personal Statement" should have the scholarship title as a heading.

The completed packet must consist of 3 copies of the following pages. Each copy is be arranged in the following order:

- (A) Application Form
- (B) Transcript
- (C) Letter of Recommendation (1)
- (D) Letter of Recommendation (2)
- (E) Activities Record
- (F) Any additional essay, letter, or special requirement as listed for specific scholarships.

Use a paperclip to attach four (4) copies of the "Application Brief" to the front of the entire application packet of 3 copies.

Applicants from schools OTHER THAN Armijo, Fairfield, Rodriguez, Sem Yeto and Vanden, SEE LAST PAGE regarding the Application Brief.

Applicants from schools OTHER THAN Armijo, Fairfield, Rodriguez, Sem Yeto and Vanden should submit ONE application packet for each scholarship to:

**Assist-A-Grad
c/o Fairfield-Suisun Chamber of Commerce
1111 Webster Street
Fairfield, Ca 94533**

DUE Friday, FEBRUARY 26, 2010

7. APPLICATION DEADLINE **Friday, FEBRUARY 26, 2010**
8. All applicants must attend a personal interview. Interviews will be scheduled for the **EVENINGS** of **APRIL 19** through **APRIL 22, 2010**, at Armijo High School library. **Interview dates and times cannot be re-scheduled.** You will receive a letter notifying you of date and time of interviews

ASSIST-A-GRAD APPLICATION

TYPE or PRINT in BLACK INK

The completed packet must consist of 3 copies of the each of the following items.
Each copy is to be arranged in the following order:

- a. Application Form
- b. Transcript
- c. Letter of Recommendation (1)
- d. Letter of Recommendation (2)
- e. Activities Record
- f. Any additional essay, letter, or special requirement as listed for specific scholarships.

Use a paper clip to attach the APPLICATION BRIEFS to the front of the entire packet of 3 copies.

GIVE COMPLETED APPLICATION PACKET TO YOUR SCHOLARSHIP ADVISOR

Student Name _____
(LAST) (FIRST) (MIDDLE)

Address: _____ City/Zip _____ Phone: _____

Cell Phone: _____ E-Mail: _____

Armijo Fairfield Rodriguez Sem Yeto Vanden other _____

Members of Family Living at Home: Father _____
 OCCUPATION (Rank, if military)
 Mother _____
 OCCUPATION (Rank, if military)
 Other _____

Number of Children now: Number of Children now:
 At Home: _____ In College: _____
 (Include yourself)

ASSIST-A-GRAD SCHOLARSHIPS FOR WHICH I AM APPLYING:

- 1. _____ # in brochure: _____
- 2. _____ # in brochure: _____
- 3. _____ # in brochure: _____

State ethnic background, if required for scholarship: _____

IF YOU ARE SCREENED OUT OF YOUR ORIGINAL SCHOLARSHIP PREFERENCES, are you willing to be considered for other scholarships? No Yes

Alternate Choice: # _____ Name of Scholarship: _____

MAJOR (State "NONE", if undecided): _____

CAREER: _____

PERSONAL STATEMENT

EXPLAIN why you are qualified for a scholarship. Include comments about achievement, financial need, career goals or community involvement.

Name: _____ Date: _____

LETTER OF RECOMMENDATION

(1)

This form is printed for your convenience. Any other letter format will be accepted.

Student Name: _____
(Last) (First) (Middle)

School: _____

DIRECTIONS:

The student who gave you this form is applying for an Assist-A-Grad scholarship. Sponsors of these scholarships find candid evaluations helpful in choosing from among the many highly qualified candidates. Sponsors are primarily interested in what you think is important about the applicant's academic, vocational and personal qualifications.

EVALUATION:

1. What are the first words which come to mind to describe the applicant?

2. Academic Characteristics:

3. Personal Characteristics:

4. Special Aptitude, Talent, Accomplishments:

BACKGROUND INFORMATION:

How long have you known the applicant?

In what capacity have you known the applicant?

(Continued on next page)

Please use the remaining space to make any additional comments:

Name (Please Print): _____

Position: _____

Signature: _____ **Date:** _____

(Please return this recommendation to the student applicant)

LETTER OF RECOMMENDATION

(2)

This form is printed for your convenience. Any other letter format will be accepted.

Student Name: _____
(Last) (First) (Middle)

School: _____

DIRECTIONS:

The student who gave you this form is applying for an Assist-A-Grad scholarship. Sponsors of these scholarships find candid evaluations helpful in choosing from among the many highly qualified candidates. Sponsors are primarily interested in what you think is important about the applicant's academic, vocational and personal qualifications.

EVALUATION:

1. What are the first words which come to mind to describe the applicant?

2. Academic Characteristics:

3. Personal Characteristics:

4. Special Aptitude, Talent, Accomplishments:

BACKGROUND INFORMATION:

How long have you known the applicant?

In what capacity have you known the applicant?

(Continued on next page)

Please use the remaining space to make any additional comments:

Name (Please Print): _____

Position: _____

Signature: _____ **Date:** _____

(Please return this recommendation to the student applicant)

ACTIVITIES RECORD

Name: _____ Age: _____ Grade: _____ Date: _____

Place an "X" in grade column for year of participation. Indicate office held (i.e., president, chairperson, secretary, treasurer, etc.) OR "M" for membership.

SCHOOL ACTIVITIES	9	10	11	12	COMMUNITY ACTIVITIES	9	10	11	12
Awards / Honors					Awards / Honors				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Student Government					Employment (State Duration)				
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Athletics						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organizations / Clubs						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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APPLICATION BRIEF

Social Security # (Optional): _____

Student Name: _____ UNWEIGHTED/ACADEMIC Student G.P.A.: _____
 (LAST) (First) (Middle Initial)

Address: _____ City: _____ Zip: _____

Telephone: _____ Cell Phone: _____ E-Mail: _____

School: _____ Date: _____

Total number of children in the family
 AT HOME: _____ Colleges applied to: _____ Accepted? YES Pending
 Total number of children in the family
 AT COLLEGE: _____ Accepted? YES Pending
 Total number of the family: _____ Accepted? YES Pending
 _____ Accepted? YES Pending

STUDENT STATEMENTS:

Financial Need: (Mark only if applicable) College Major: _____

HIGH MEDIUM LOW Expected Career: _____

SCHOLARSHIPS AWARDED / AMOUNTS:

1. _____ 2. _____

SPECIAL QUALIFICATIONS: _____

IF YOU ARE SCREENED OUT OF YOUR ORIGINAL SCHOLARSHIP PREFERENCES, are you willing to be considered for other scholarships?

NO YES Alternate Choice #: _____ Name of Scholarship: _____

ASSIST-A-GRAD SCHOLARSHIPS FOR WHICH I AM APPLYING:

1. _____ # _____ For Office Use _____

2. _____ # _____ For Office Use _____

3. _____ # _____ For Office Use _____

(cut here) ----- (cut here) ----- (cut here)

IMPORTANT**TO: Students attending:**

Armijo High
 Fairfield High
 Rodriguez High
 Sem Yeto High
 Vanden High

Please TYPE or PRINT the above Application Brief form or complete on the Web Site.

Cut on the dotted line.

Make three (3) copies. Attach ALL four (4) copies to the front of your packet of three applications.

TO: Students attending schools OUTSIDE of the Fairfield and Vanden area:

Please TYPE or PRINT the above Application Brief form or complete it on the Web Site. Cut on the dotted line.

Make a copy and attach both the original and copy to the front of the application.