



**The Culturally Integrated Education for Latinos Organization**

**VICTOR A. AND DAISY A. JUAREZ**

**LATINO SCHOLARSHIP FUND APPLICATION**

## **SCHOLARSHIP AWARDS**

Every year the Culturally Integrated Education for Latinos Organization (CIELO) will award three (3) \$2000 scholarships as part of the Victor A. and Daisy A. Juarez Latino Scholarship Fund. Successful applicants may use these funds for education related expenses deemed appropriate by the educational institution they attend. Funds are paid to the school in the student's name.

An announcement of scholarship award decisions will be postmarked by August 16<sup>th</sup> each year to each applicant at the address listed on their application. All decisions made by the CIELO Executive Board concerning the award, denial, and amount of scholarship funds are final.

### **ELIGIBILITY:**

- Applicants should be of, and identify with, a Hispanic and/or Latino background, including, but not limited to: being of first or second generation from a Spanish-speaking country, being of first or second generation from countries in Latin America, the Caribbean (Puerto Rico, Cuba, Dominican Republic), South America (Ecuador, Bolivia, Colombia, Peru, etc.), and Central America (Honduras, Costa Rica, etc.)
- Minimum grade point average (GPA) of 2.5 on a 4.00 scale
- Currently enrolled in or accepted to attend an accredited university, college, or trade school with the main campus located in Sangamon County, Illinois, or applicant must be a member of CIELO and live within 60 miles of the city of Springfield, IL
- All application materials must be typed or legibly written in English
- The Victor A. and Daisy A. Juarez Scholarship may only be awarded to any person once in a lifetime

### **SELECTION:**

Applications will be evaluated equally on the following criteria:

- Perceived financial need, as determined by the CIELO Application Review Committee
- Academic letter of recommendation
- Applicant's personal essay
- Community involvement and/or extracurricular activities documented by applicant including letter of recommendation from a leader of these activities
- Any special circumstances of the applicant will be taken into consideration by members of the Application Review Committee



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**APPLICATION PACKET MUST INCLUDE:**

- A completed and signed application
- A copy of high school or GED, college, or vocational school transcripts
- A letter of academic recommendation on official letterhead
- A personal essay
- A list of community, civic, and/or athletic activities including a letter of recommendation from someone in a leadership position within aforementioned activities

**POSTMARK APPLICATION DEADLINE:** Applications postmarked after **May 15**, will not be accepted; no extension will be granted. **Mail your application to VA&DAJ Latino Scholarship Fund, 1010 Mesa Drive, Chatham, IL, 62629**

**Personal Information:**

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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

*Please provide the following information where we may contact you via call, text/sms, or e-mail.*

Telephone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_ Other: \_\_\_\_\_

**Education:**

*Only Complete the following section if:*

- have graduated from High School
- are currently attending your senior year of High School or vocational school
- have attained or are in the process of attaining your GED:

High School or Vocational School/ District:

\_\_\_\_\_

Principal's Name: \_\_\_\_\_ School Phone Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

School Address: \_\_\_\_\_

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

Grade: \_\_\_\_\_ Expected Graduation/Certificate Date: \_\_\_\_/\_\_\_\_/\_\_\_\_



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**All Applicants:**

Are you currently attending college, university or post-secondary school?  YES  NO

If yes, Name of school: \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_ (on a 4.00 scale)

Name of school you plan to attend: \_\_\_\_\_  
(Note: If you are awarded a scholarship, this is the school to which the funds will be directed in your name.)

School Mailing address: \_\_\_\_\_

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

Type of school (check one):

2-Year  4-Year  Post-Graduate Program  Post-Secondary/Trade or Technical School

Other (please specify) \_\_\_\_\_

Are you currently enrolled as a student at this school?  YES  NO

If yes, year in which are you are currently enrolled (check one):

Freshman  Sophomore  Junior  Senior  Post Graduate Program

Certification Program  Other (please specify) \_\_\_\_\_

If no, have you applied for admission:  YES  NO

If yes, for what semester/term? \_\_\_\_\_

Have you been accepted?  YES  NO

Degree/Certification you plan to achieve: \_\_\_\_\_

Please list any academic honors you have received: \_\_\_\_\_

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**Financial Aid:**

What percentage of your educational expenses in the next year will be funded by the following sources?

\_\_\_\_\_% Family \_\_\_\_\_% Personal Savings \_\_\_\_\_% Employment While Attending School

\_\_\_\_\_% Loans \_\_\_\_\_% Scholarships/Grants \_\_\_\_\_% Other (please specify): \_\_\_\_\_

If you have any extenuating circumstance that impacts your ability to fund your education that you would like the Evaluation Committee to consider, please include a separate statement describing those circumstances and how they will impact the funding of your education.

**Academic Achievement:**

- **Transcripts:** Please include a copy of your transcripts
  - NOTE: Failing to provide copies of your transcripts will result in the disqualification of your application. If you can justify why you are unable to provide copies of your transcripts (e.g. school does not issue grades), please provide a written explanation validated by the educational institution. The Evaluation Committee may consider your explanation and stated GPA in lieu of actual copies of your transcripts.
- **Academic Letter of Recommendation:** Please include an academic letter of recommendation from a school official written on official school letterhead. This should address your most recent performance and your potential for success at a university, college, or post-secondary school.

**Community Service and Other Activities:**

- **Letter of Recommendation: Community, Civic, and/or Athletic Activities:** Please include a letter of recommendation from a teacher, clergy, or adult club leader describing your community, civic, and/or athletic activities. The person writing the letter should include his/her mailing address and telephone number in the letter or write the letter on official letterhead. Note: The Evaluation Committee requires **separate** letters of recommendation to meet this requirement.
- **List of Activities:** Please provide a list of your involvement in any community, civic and athletic activities. Involvement in your community is highly valued by the review committee so please explain in detail.

**Personal Essay:** Please submit with your completed application a typed essay in English of 300 words or less in which you describe:

“What does it mean to you to be a Hispanic and/or Latino person in the United States today?”

Be concise and incorporate your own personal experiences when developing your response. Comment on how this scholarship would affect you personally.



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**Other Information:** How did you hear about this scholarship opportunity? \_\_\_\_\_

All scholarship applications and supporting materials submitted will remain the property of CIELO and will not be returned to the applicant.

**CERTIFICATION:**

I hereby certify that all the information in this application is true and accurate to the best of my knowledge. I hereby authorize CIELO – Culturally Integrated Education for Latinos Organization - to utilize any information which I have submitted as part of this application. I commit to being present for the Scholarship Award Ceremony. I understand that all funds awarded from the Victor A. and Daisy A. Juarez Latino Scholarship Fund will be used solely for the purpose of educational needs consistent with the school’s general requirements for financial aid. I understand that if I use the scholarship funds for any purpose other than stated herein, or if the information I have submitted is found to be untrue or inaccurate, I will forfeit all funds awarded to me and agree to return the full amount of the funds received to-date to CIELO, Inc.

Furthermore, I hereby certify that I understand and agree that if I am awarded a scholarship, by accepting the scholarship I am giving permission for CIELO, Inc. to use any information I have provided in the application, as well as photographs from the scholarship award event, for the purposes of publicizing the scholarship program. If I have submitted information in the application that I would prefer not be used for publicizing the scholarship program, I understand that I must include a statement with this application specifically detailing what information I do not wish to be used.

Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Printed Name: \_\_\_\_\_

POSTMARK APPLICATION DEADLINE: May 15<sup>th</sup> (annually)

Applications postmarked after **May 15<sup>th</sup>**, or received after May 20<sup>th</sup>, will not be accepted; no extension will be granted.

**Mail your application to VA&DAJ Latino Scholarship Fund, 1010 Mesa Drive, Chatham IL.**

*If you have questions, please send them to [Info@elcielo.org](mailto:Info@elcielo.org) or call 312-834-3338*