

ALBUQUERQUE COMMUNITY FOUNDATION

2016-17 Student Scholarship Application

Application Deadline: March 16, 2016

** This form must be completed, signed and returned with all required attachments.

** Please check the box to indicate the scholarship program that THIS application is for:

- | | |
|--|--|
| <input type="checkbox"/> Bryan Cline Memorial Soccer (EHS only) | <input type="checkbox"/> Notah Begay III Scholarship |
| <input type="checkbox"/> James Ledwith Scholarship | <input type="checkbox"/> Robby Baker Scholarship (LCHS only) |
| <input type="checkbox"/> Kiwanis Club of Albuquerque Scholarship | <input type="checkbox"/> Rose Scholarship (AHS only) |
| <input type="checkbox"/> New Mexico Manufactured Housing | <input type="checkbox"/> Woodcock Family Education Program |

Name of Applicant _____
Home address _____
City, State, Zip _____
Telephone Number _____ E-mail Address _____
Date of Birth _____ Sex <input type="checkbox"/> Male <input type="checkbox"/> Female How long have you been a New Mexico resident? _____

FAMILY INFORMATION (provide where applicable)
Name of Mother/Stepmother/Guardian _____
Address _____
Name of Father/Stepfather/Guardian _____
Address _____
Check if applicable: <input type="checkbox"/> Parents divorced <input type="checkbox"/> father deceased <input type="checkbox"/> mother deceased

HIGH SCHOOL INFORMATION:
Name of School _____
Address _____
City, State, Zip _____ GPA _____
School Counselor _____ Date of Graduation _____
School Website Address _____
Counselor E-mail Address _____

OTHER FINANCIAL SOURCES
Did you apply for Federal Financial Aid? _____ If you have been accepted for a Federal Financial Aid award, how much will you receive? \$ _____ What is your EFC? _____
How much debt will you have when you graduate? In student loans _____ Credit Cards _____

List other scholarships, financial aid awards, college savings plans or other sources that you expect to receive. Include civic organizations, religious institutions, and/or tribal support and the NM Lottery Success Scholarship, 529 plans (give names and amounts):

COLLEGE/UNIVERSITY INFORMATION (Nonprofit or Public Educational Institution)
(Fill out A or B)

A. Applicant will attend the following college/university:

Name of University/College _____

Website Address _____ City, State _____

Why did you select this school? Close to home Away from home Cost Major Other _____

B. University/college has not been confirmed, application has been made to:

Where do you plan to live? On campus Off campus With Parent

Anticipated Course of Study _____

Where did you hear of this scholarship? school counselor website other _____

ATTACHMENTS (please include YOUR NAME on each attachment):

1. High school transcript including grades through 12th grade fall semester
2. Include dual enrollment classes and grades with transcript and/or resume.
3. Copy of SAT and/or ACT scores
4. Résumé (no more than three (3) pages): include high school activities, awards, honors, community service, employment, internships. *** note number of years of participation and any office or position held for each activity listed
5. Personal essay telling us (1) why you are going to college, (2) what you plan to study, (3) what your career goals are, and (4) any unusual challenges you face in continuing your education
6. **Other attachments as required by each scholarship program** – Please refer to general description of each program for the correct list of additional required attachments.

I (we) certify that all information on this form is true and complete to the best of my (our) knowledge. If asked I (we) agree to give documentation for information given.

Student's Signature

Date

Signature of Parent or Guardian

Date

Applications must be received or postmarked by the deadline. For the sake of fairness no exceptions will be made.

Incomplete or unsigned applications will not be considered. **POSTMARK deadline: March 16, 2016**

Mail completed application and all required attachments to:

**Albuquerque Community Foundation
P.O. Box 25266, Albuquerque, NM 87125-5266**

OPTIONAL 2016 Scholarship Reference Form

Albuquerque Community Foundation

Please write a 1-page personal letter - OR - use this form.

Reference Form – Return to Student

or Mail to Albuquerque Community Foundation, P.O. Box 25266, Albuquerque, NM 87125-5266

- must be received by March 16, 2016 or student may be disqualified
- must be received in a sealed envelope

Name of Applicant _____

Applicant's High School _____

Explanation: This form will be given to you by an applicant for a scholarship program at the Albuquerque Community Foundation. The information you provide will be kept in the strictest confidence. We appreciate your time and effort in evaluating the applicant and ask that you complete and return this form as instructed above.

How long have you known applicant and what is your direct association?

If teacher/instructor, what was the applicant's grade in your course? _____

Which of the following statements most nearly describes the applicant?

- An exceptionally hard-working person.
- Highly intelligent person who does not work to the full limit of capabilities.
- A highly intelligent and exceptionally hard-working person.
- Other (please state in your own words)

What are the applicant's strongest qualities or any special circumstances which you believe entitle him/her to consideration for a scholarship?

Please rate based on your knowledge of this applicant's potential for success in college.

	Marginal	Fair	Good	Excellent	One of the very top individuals I have encountered in my career
Academic promise	_____	_____	_____	_____	_____
Character/personal promise	_____	_____	_____	_____	_____

Your name (please print) _____

Your school or company & address _____

Position _____ Subject & level _____ Year taught _____

Signature _____ Email _____