

HCCW EDUCATION FUND/PHILIP ARREOLA SCHOLARSHIP APPLICATION
\$10,000 HIGH SCHOOL SENIORS ONLY

I. APPLICANT INFORMATION

(Type or print legibly)

Last Name _____ First _____ Telephone _____

Address _____ City _____ State _____ Zip Code _____

County _____ Name of parents or legal guardians _____

Are you a U.S. Citizen? Yes ___ No ___ Pending ___ If pending, explain(use additional paper if needed) _____

II. ABOUT YOUR HIGH SCHOOL

High School Attending _____ Class Rank _____

Senior Year GPA _____ Cumulative GPA _____

ACT / SAT Score _____ Graduation Date _____

To which Wisconsin college(s) have you applied? _____

Have you been accepted, if so, where? _____

Have you been notified that you will be receiving any scholarships? ___ Yes ___ No

If yes, please list names and amounts below:

Scholarship Name	Amount
_____	_____
_____	_____
_____	_____

I certify that information on this section is complete as of this date _____. I understand that omissions may result in this scholarship not being offered or rescinded.

Signature: _____

NOTE: The two required letters of recommendation must be included.

III. FURNISH AN ESSAY IN YOUR OWN WORDS THAT INCLUDES THE FOLLOWING:

- (essay must be typed, double-spaced and not to exceed 3 pages)
- What are your strengths that should be considered for this scholarship?
- What are your career plans?
- Provide a brief commentary relative to your current/future commitment to the Hispanic community?
- Describe your financial need for this scholarship?

On the sheet provided list school/community honors and extracurricular activities and employment history.

All information contained herein is true and correct to the best of my knowledge.

I hereby authorize the review of my high school and/or college transcripts by the HCCW Scholarship Committee. The committee may also contact schools and references in order to confirm or discuss any information contained in this application.

Applicant's Signature: _____ Date: _____

Extracurricular Activity
(Complete on back) 