



Promoting Hispanic Education Since 1983

Dear Student,

Thank you for your interest in Esperanza's College Scholarship Program. Attached is the Scholarship Application. Eligibility & Selection Requirements are summarized below:

- 1) Students must be residents of Cuyahoga or Lorain Counties in Ohio.
- 2) Students must be graduating high school or be enrolled full-time in a college or university as an undergraduate student.
- 3) Student must have Student Aid Report (SAR) that proves that the FAFSA was filed and processed and demonstrate financial need.
- 4) Students must have achieved a minimum high school or college grade-point average of 2.75 (based on 4.0 scale) and maintain it for all disbursements.
- 5) Students must have participated in extracurricular activities and school or community service.
- 6) For high school students you must take either the SAT or ACT and submit to Esperanza by application deadline.
- 7) Students must complete and fulfill the requirements listed in the application.
- 8) Applicants will be evaluated based on their academic achievements, quality or personal statements, applicant appraisals/references, individual interviews, and family income.
- 9) Family Income must not exceed **\$60,000** per year.
- 10) Student is not eligible if he/she is an immediate relative of staff or board of trustees member.
- 11) Students must provide 2 letters of recommendation along with the application.

Esperanza encourages all applicants to actively apply for as many scholarships and other financial aid programs they may qualify for. For additional information on scholarship opportunities and colleges, we encourage all local students and their parents to visit the:

**Cleveland Scholarship Programs, Inc.'s website:**

[www.csp@cspohio.org](http://www.csp@cspohio.org)

**and also the Cleveland foundation's website:**

[www.clevelandfoundation.org](http://www.clevelandfoundation.org)

**Click on Scholarship icon for additional information**

### *Esperanza's Scholarship Processing Schedule for 2010 - 2011*

Key Events	Date
Application Deadline:	<b>Friday, March 26, 2010</b>
Notification to Semifinalists:	April 2010
Interviews & Photos Begin:	May 2010
Notification to Finalists:	June 2010
Scholarship Awards Luncheon:	<b>Friday, June 25, 2010*</b>
Special NASA Scholarship Reception:	11 AM on Friday, June 25, 2010*
1 <sup>st</sup> half of Scholarship Award Disbursement:	Mid-September 2010
Deadline for the 1 <sup>st</sup> half of Scholarship Award Pick Up:	December 10, 2010
2 <sup>nd</sup> half of Scholarship Award Disbursement:	Mid-January 2011
Deadline for the 2 <sup>nd</sup> half of Scholarship Award Pick Up:	March 13, 2011

We look forward to your participation in the program and wish you much success. Thank You.

Sincerely,

*Zoraida Valentin*

2009-2010 Scholarship Coordinator

Esperanza, Inc.

Esperanza, Inc.

3104 West 25<sup>th</sup> Street – 4<sup>th</sup> Floor – Cleveland, Ohio 44109

216-651-7178 Phone \* 216-651-7183 Fax

\*Date subject to change



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## 2010- 2011 Esperanza Scholarship Application

Last Name	First Name	Middle	Code 10-
Permanent Home Address			
City	State	Zip	County
Home Number	Cell/Pager/Other Phone		
E-mail Address			
Social Security Number	Date of Birth	Age	
U.S. citizen or Legal resident		Gender	
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Female <input type="checkbox"/> Male	
Permanent Resident Card Holder <input type="checkbox"/> Yes <input type="checkbox"/> No			
<i>* Please provide a copy of Permanent Resident Card</i>			
Hispanic	Ethnicity		
<input type="checkbox"/> Yes <input type="checkbox"/> No			

YOUR EDUCATION PLANS	
Current School	Anticipated Graduation date: Month ____ Year ____
City	State Phone
The college or university you plan to attend beginning with the fall 2010 semester	
First choice:	
Second choice:	
Major or course of study:	
What will your college status be in the fall 2010?	
<input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Other _____	

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

If space provided in any section is inadequate, you may continue on additional sheets of paper using the same format. DO NOT repeat information already reported on the application form. Your name, address, and the name of this scholarship program should be included on all attachments.

FAMILY BACKGROUND			
NAME	<input type="checkbox"/> FATHER Name:	<input type="checkbox"/> GUARDIAN Name:	<input type="checkbox"/> MOTHER Name:
OCCUPATION/TITLE			
EMPLOYER'S NAME			
EMPLOYER'S PHONE			
HIGH SCHOOL GRADUATE	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
COLLEGE GRADUATE	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
PARENT SUPPORTS ME	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
PARENT LIVES WITH ME	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
LEGAL RESIDENT OF OHIO	<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
BROTHER(S) & SISTER(S):	Number ___ Ages _____		
How many persons in your household (including yourself) will be in college for the next academic year?			
How many persons in your household?			

### WORK EXPERIENCE

Describe your paid work experiences during the past four years (for example, food service, babysitting, lawn mowing, office work). Indicate dates of employment for each job and the approximate number of hours worked each week. Please report volunteer work in the next section.

ORGANIZATION/EMPLOYER	TYPE OF WORK	CHECK ONE		APPROXIMATE DATES		HOURS PER WEEK
		SUMMER	SCHOOL YR	FROM MM/YY	TO MM/YY	
		<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>			
		<input type="checkbox"/>	<input type="checkbox"/>			

### ESPERANZA SCHOLARSHIPS RECEIVED

Have you ever received a scholarship from Esperanza?  Yes, when? \_\_\_\_\_  No

Have you ever participated in any of Esperanza's programs?  Yes, when? \_\_\_\_\_  No

**ACTIVITIES, AWARDS, AND HONORS**

List all school activities in which you have participated during the past four years (for example, student government or sports). List all community activities in which you have participated without pay during the past four years (for example, Boy/Girl Scouts, Esperanza volunteer, Special Olympics, church or community). Note all awards, honors, and offices held.

ACTIVITY	DURATION	SPECIAL AWARDS/HONORS	OFFICES HELD

**ESPERANZA ACTIVITIES**

List all the Esperanza activities and programs which you have participated in.

ACTIVITY	PROGRAM (SISCO, YOUTH LEADERSHIP, ELLA, ELLOS, ETC.)	SCHOOL	DATES

**ESPERANZA SCHOLARSHIP APPLICATION**

*\*\*\* If not included, the application is incomplete and will not be considered.*

Requirements	Included
1.) Completed signed and dated Scholarship Application <i>*** Must be post marked by March 26, 2010</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.) Completed Personal Statements	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.) Most recent official High School or College Transcript	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.) Copy of Student Aid Report (SAR) (Proof that FAFSA was filed and processed) <i>*** Please explain any special circumstances regarding your income.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.) Two (2) Applicant Appraisals (not from relatives)	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.) Two letters of recommendation (not from relatives)	<input type="checkbox"/> Yes <input type="checkbox"/> No

I certify that all statements in this application are true and correct. I give the high school or college I attend permission to provide Esperanza, Inc. with my academic and financial aid information.

**Mail your completed application:**



Esperanza, Inc.  
c/o Scholarship Committee  
3104 West 25<sup>th</sup> Street - 4<sup>th</sup> Fl.  
Cleveland, OH 44109

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Questions, please email [scholarships@esperanzainc.org](mailto:scholarships@esperanzainc.org)  
or call (216) 651-7178**



## APPLICANT APPRAISAL (required)

**Applicant Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**To the Applicant:** This section is required and must be completed in the format provided. If it is incomplete, your application will not be considered. This section is to be completed by a teacher, coach, school administrator, school counselor, or community member.

**To the Adult Appraiser:** You have been asked to provide information supporting this application. Please give immediate and serious attention to the following statements. Upon completion, Please return to student in a sealed envelope with your signature on the envelope. **A letter of recommendation does not replace this section.**

1)	The applicant's choice of post-secondary education program is	<input type="checkbox"/> extremely appropriate	<input type="checkbox"/> very appropriate	<input type="checkbox"/> moderately appropriate	<input type="checkbox"/> inappropriate
2)	The applicant's achievements reflect his/her ability	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
3)	The applicant's ability to set realistic and attainable goals is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
4)	The quality of the applicant's commitment to school and/or community is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor
5)	The applicant is able to seek, find, and use learning resources	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
6)	The applicant demonstrates curiosity and initiative	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
7)	The applicant demonstrates good problem-solving skills, follows through, and completes tasks	<input type="checkbox"/> extremely well	<input type="checkbox"/> very well	<input type="checkbox"/> moderately well	<input type="checkbox"/> not well
8)	The applicant's respect for self and others is	<input type="checkbox"/> excellent	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> poor

9) What is the student's principal strength? Improvement opportunity?

10) How has the student showed leadership ability?

11) In your opinion, has the student been affected by any special circumstances?

Appraiser name	Title	Phone
Signature	Organization	Date

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