Rudy Chavarria Scholarship Foundation

Scholarship Application Form 2017-18

Type or print all information except signatures. Completeness and neatness ensures your application will be reviewed promptly. Answer all questions on this form. Application must be postmarked or emailed no later than March 2, 2018. (See instructions for mailing or emailing address).

**Applicant Data**

1. Name
   Last                                       First    Initial

2. Home Address
   Number                       Street            Apt. No.                   City                                   State              Zip Code

3. Phone No.   E-mail Address

4. Date of Birth                   5. Gender: M         F    6. Expected Graduation Date
   Month              Day             Year

7. School to which you are applying

8. Term/Year Interest

9. Major/Career

**Parent or Guardian Information**

1. Name
   Last                                       First    Initial

2. Relationship to Applicant

3. Address
   Number                       Street            Apt. No.                   City                                   State              Zip Code

4. Day Telephone   5. Email Address

**Parents’ Financial Data (required)**

The applicant’s parents or guardians must complete this portion of the application. To be considered for an award this section must be filled out completely. Adjusted gross income should be from parents’ 2016 or 2017 filed tax return.

1. Are you a foster youth? If Yes, skip this section of Parents’ financial data
   Yes□         No□

2. Total size of your household

3. Number of dependent children in your household

4. Adjusted Gross Income (FORM 1040) A copy of Form 1040 must be submitted with application
   Yes□         No□

5. Have you submitted the 2017-18 Free Application for Federal Student Aid (FAFSA)?
   Yes□         No□
Autobiographical Information

Answers to the following questions will help us determine your motivation and preparation to undertake college work. Please answer as precisely and honestly as possible. Use complete sentences and avoid responses such as “yes” or “no”. Use as much space as you need, tables will expand to allow for more information. Feel free to attach additional documents to support your application.

1. List any volunteer, extracurricular activities, community service or work experience in which you are or have been involved.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Description of activity –Note any leadership positions-</th>
<th>No. of years of Involvement</th>
<th>Hours per Week</th>
<th>Weeks per Year</th>
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2. List any awards and/or honors you have received

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<thead>
<tr>
<th>Award or Honor</th>
<th>Description of award or honor</th>
<th>Award/Honor Type</th>
<th>Date Received</th>
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<tr>
<td></td>
<td></td>
<td>Academic</td>
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<td>Other</td>
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3. Why would you like to attend college? Discuss your career and personal goals. Make a brief statement or summary of your plans as they relate to your educational and career objectives and long term goals.

4. Briefly describe your family’s economic background. Include information about your family’s financial situation as needed.
5. Special Circumstances. Please describe any special circumstances that have affected your achievement in school, work experience, or your participation in school and community activities.

6. Please tell us more about yourself. Is there any additional information you would like the Rudy Chavarria Scholarship Foundation to consider in reviewing your application?

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**Checklist**

Applicant is responsible for submitting all materials to the Rudy Chavarria Scholarship Foundation on time. Incomplete applications will not be considered. *Use the following checklist to ensure that all the following materials are submitted at one time.*

- Student application, signed and complete
- Current complete transcripts of grades
- Copy of most recently filed 1040 tax form
- Two Reference letters using form provided by RCSF

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All materials, including transcripts, must be submitted to:

Rudy Chavarria Scholarship Foundation  
Selection Committee  
P.O. Box 4311  
La Puente, CA 91744  
Or email application to: rudy@rudychavarria.org

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**Postmark deadline March 2, 2018**

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**Certification**

I acknowledge decisions are final. I certify I meet the eligibility requirements of the program as described in the guidelines and the information provided is complete and accurate. I understand that RCSF has the right to confirm and verify the information submitted in this application and that, if requested, I will need to provide proof. I also understand that falsification of information may result in termination of any award granted. I consent to the use of the applicant’s photograph for the purpose of promoting the RCSF including the foundation’s website.

Applicant’s Signature

Date

Parent/Guardian Signature

Date
Rudy Chavarria Scholarship Foundation
Scholarship Recommendation Form 2017-18

Applicant’s Name: ___________________________ Phone: ___________________________

Last   First  Initial

Address: ___________________________

Number   Street           Apt. No.                   City                                   State              Zip Code

School Applying to: ___________________________ Term/Year: ___________________________

To the Student:
Complete the above information and give this form to a counselor, teacher, community member, employer, or any other individual
who can comment about your potential to succeed in college. This form should not be completed by a family member or by the
applicant. The RCSF requires two (2) recommendations.

To the Individual Completing this Form:
The person whose name appears above has applied for a scholarship award from the Rudy Chavarria Scholarship Foundation, and
you have been asked to provide information in support of this application. Please answer the questions below in a specific and
candid manner, noting in particular the student’s maturity, initiative and academic potential to succeed in a higher education
program. Thank you in advance for your time in completing this form.

Your Name: ___________________________ Position: ___________________________

School/Organization: ___________________________ Phone: ___________________________

1. How long have you known the applicant? _______ years _______ months. Under what circumstances?
   __________________________________________________________________________
   __________________________________________________________________________

2. Based on your knowledge of the applicant, check how you rate him/her in following areas:

   The applicant’s choice of postsecondary educational program
   ☐ extremely appropriate  ☐ very appropriate  ☐ moderately appropriate  ☐ inappropriate

   The applicant’s achievements reflect his/her abilities.
   ☐ extremely well  ☐ very well  ☐ moderately well  ☐ not well

   The applicant’s ability to set realistic and attainable goals is
   ☐ excellent  ☐ good  ☐ fair  ☐ poor

   The applicant is able to seek, find and use learning resources
   ☐ extremely well  ☐ very well  ☐ moderately well  ☐ not well

   The quality of applicant’s commitment to school and/or community is
   ☐ excellent  ☐ good  ☐ fair  ☐ poor

   The applicant demonstrates curiosity and initiative
   ☐ extremely well  ☐ very well  ☐ moderately well  ☐ not well
Applicant’s Name: __________________________________

3. To your knowledge, does this applicant have a historically disadvantaged background (i.e., low income for several years, first-generation college student, migrant family, etc.)?  
   Yes [ ] No [ ]

Why? ____________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

4. What qualities best describe this applicant?
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

5. Please discuss any barriers to achievement the applicant has faced. Do you believe they will affect his/her performance in college?
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

6. What is your assessment of the student’s potential, motivation, or capability for undertaking college work and potential to succeed in college?
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

Signature ________________________________  Date ________________________________
Rudy Chavarria Scholarship Foundation
Scholarship Recommendation Form 2017-18

Applicant’s Name

Phone

Last First Initial

Address

Number Street Apt. No. City State Zip Code

School Applying to Term/Year

To the Student:
Complete the above information and give this form to a counselor, teacher, community member, employer, or any other individual who can comment about your potential to succeed in college. This form should not be completed by a family member or by the applicant. The RCSF requires two (2) recommendations.

To the Individual Completing this Form:
The person whose name appears above has applied for a scholarship award from the Rudy Chavarria Scholarship Foundation, and you have been asked to provide information in support of this application. Please answer the questions below in a specific and candid manner, noting in particular the student’s maturity, initiative and academic potential to succeed in a higher education program. Thank you in advance for your time in completing this form.

Your Name Position

School/Organization Phone

3. How long have you known the applicant? _______ years _______ months. Under what circumstances?

_______________________________________________________________________________________

_______________________________________________________________________________________

4. Based on your knowledge of the applicant, check how you rate him/her in following areas:

<table>
<thead>
<tr>
<th></th>
<th>extremely appropriate</th>
<th>very appropriate</th>
<th>moderately appropriate</th>
<th>inappropriate</th>
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<tbody>
<tr>
<td>The applicant’s choice of postsecondary educational program</td>
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<tr>
<td>The applicant’s achievements reflect his/her abilities.</td>
<td>extremely well</td>
<td>very well</td>
<td>moderately well</td>
<td>not well</td>
</tr>
<tr>
<td>The applicant’s ability to set realistic and attainable goals is</td>
<td>excellent</td>
<td>good</td>
<td>fair</td>
<td>poor</td>
</tr>
<tr>
<td>The applicant is able to seek, find and use learning resources</td>
<td>extremely well</td>
<td>very well</td>
<td>moderately well</td>
<td>not well</td>
</tr>
<tr>
<td>The quality of applicant’s commitment to school and/or community is</td>
<td>excellent</td>
<td>good</td>
<td>fair</td>
<td>poor</td>
</tr>
<tr>
<td>The applicant demonstrates curiosity and initiative</td>
<td>extremely well</td>
<td>very well</td>
<td>moderately well</td>
<td>not well</td>
</tr>
</tbody>
</table>
Applicant’s Name: __________________________________

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<tr>
<th>The applicant demonstrates good problem-solving skills, follows through and completes tasks</th>
<th>Yes ☐ No ☐</th>
</tr>
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<tbody>
<tr>
<td>□ extremely well □ very well □ moderately well □ not well</td>
<td></td>
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<tr>
<th>The applicant’s respect for self and others is</th>
<th>Yes ☐ No ☐</th>
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</thead>
<tbody>
<tr>
<td>□ excellent □ good □ fair □ poor</td>
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<tr>
<th>The applicant’s academic achievement</th>
<th>Yes ☐ No ☐</th>
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<tbody>
<tr>
<td>□ outstanding □ above average □ average</td>
<td></td>
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<tr>
<td>□ needs improvement</td>
<td></td>
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</table>

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<tr>
<th>The applicant’s academic potential</th>
<th>Yes ☐ No ☐</th>
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<tbody>
<tr>
<td>□ outstanding □ above average □ average</td>
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<tr>
<td>□ needs improvement</td>
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<tr>
<th>The applicant’s ability to overcome frustrating experiences and tolerate minor disappointments</th>
<th>Yes ☐ No ☐</th>
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<tr>
<td>□ excellent □ good □ fair □ poor</td>
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<tr>
<th>The applicant’s potential for growth</th>
<th>Yes ☐ No ☐</th>
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<tr>
<td>□ excellent □ good □ fair □ poor</td>
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</table>

3. To your knowledge, does this applicant have a historically disadvantaged background (i.e., low income for several years, first-generation college student, migrant family, etc.)?  
Yes ☐ No ☐  
Why?  
____________________________________________________________________________________  
____________________________________________________________________________________  
____________________________________________________________________________________  
____________________________________________________________________________________  

4. What qualities best describe this applicant?  
____________________________________________________________________________________  
____________________________________________________________________________________  
____________________________________________________________________________________  
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____________________________________________________________________________________  

6. What is your assessment of the student’s potential, motivation, or capability for undertaking college work and potential to succeed in college?  
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____________________________________________________________________________________  
____________________________________________________________________________________  
____________________________________________________________________________________  
____________________________________________________________________________________  

Signature __________________________________________  Date ____________________