

Scholarship Application Form

You must be a youth member or one of your parents/guardians must be an adult member of the Garcia Guild to receive a scholarship. If you or a parent/guardian is not a member you may become a youth member (\$10 annual membership fee). Please contact the Garcia Guild to become a member by calling 707-882-3425. There are some grants available for youth membership if the fee is a hardship.

| Name: | |
|---|-------------------------------------|
| Home address: | |
| Home phone:Cell phone: | |
| Email address: | |
| Father's/Guardian's name: | |
| Garcia Guild member? Yes No | |
| Mother's/Guardian's Name | |
| Garcia Guild member? Yes No | |
| Are you a youth member of the Garcia Guild? Yes | No |
| What college/university/trade/vocational school or apprentice p | rogram do you plan to attend? |
| Have you been accepted by this school? Yes No | Currently enrolled |
| SUBMIT THE FOLOWING TO THE GARCIA GUILD NO LATER THAN | APRIL 12, 2019 TO THE GARCIA GUILD, |
| PO BOX 164, MANCHESTER, CA 95459 | |

- 1. A completed Application Form and Essay
- 2. A completed Activity Sheet (attached)
- 3. A completed Attendance Form (attached)
- 4. A copy of your High School Transcript
- 5. A minimum of two letters of recommendation for both character and potential for academic success at the college/university/trade/vocational level from teachers, counselors and/or administrators.

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In essay form, please answer the following questions (on a separate sheet of paper):

What are your long term educational and career goals?
What are your reasons for establishing these goals?
What experiences have you had that relate to these goals (include the most significant activities you have been involved in high school and how they have benefited you and others)?
How do you plan to attain these goals?
Why are you applying for this scholarship?

ACTIVITY SHEET

List all school and community activities in which you have been involved the past four years. Include the school year in which you were involved

| l. | School Activities | | | | |
|-----|----------------------|-------|----|----|----|
| | | 9 | 10 | 11 | 12 |
| | | 9 | 10 | 11 | 12 |
| | | 9 | 10 | 11 | 12 |
| | | 9 | 10 | 11 | 12 |
| | | 9 | 10 | 11 | 12 |
| _ | | 9 | 10 | 11 | 12 |
| II. | Community Activities | | | | |
| | | 9 | 10 | 11 | 12 |
| | | 9 | 10 | 11 | 12 |
| | | 9 | 10 | 11 | 12 |
| | | 9 | 10 | 11 | 12 |
| _ | | 9 | 10 | 11 | 12 |
| | | 0 | 10 | 11 | 12 |

| III. | Employment (include Length of Time Employed) | | | | |
|-------|--|---------|----------|----------|-----------------|
| | | 9 | 10 | 11 | 12 |
| | | 9 | 10 | 11 | 12 |
| | | 9 | 10 | 11 | 12 |
| | | 9 | 10 | 11 | 12 |
| IV. | Awards, Honors & Achievements | | | | |
| | | | | | _ |
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| | | | | | _ |
| V. | Please add any other information that you feel the Scholarship separate sheet of paper) |) Commi | ttee sho | ould kno | <u>w (</u> on a |
| | | | | | |
| awar | gning this, you acknowledge and agree that you understand the G ed as the result of this application. You also agree to participate in d scholarship committee if asked. | | - | | - |
| Signa | ature of Applicant | Date | | | _ |

| TO BE COMPLETED BY COUNSELOR | | |
|-------------------------------|--|--|
| Student's Name | | |
| G.P.A (minimum 3.0) | | |
| Attendance Record: | Total number of school days this year | |
| | Total number of days applicant was absent: | |
| | Excused Unexcused | |
| Counselor Signature | | |
| Counselor Name (please print) | | |
| Date | | |