

SCHOLARSHIP APPLICATION FOR ACADEMIC YEAR 2019-2020

This application has to be fully completed, otherwise it will be rejected. Please type or print neatly and legibly. **DEADLINE TO SUBMIT APPLICATION: MUST BE POSTED BY March 29, 2019.**

				Application Date	
Last Name:		First Name:		Middle Initial:	
				Female () Male ()	
US Citizen () US Legal resident () SSN: _____		Place of Birth:		Date of Birth:	
Permanent Address		City	State	Zip Code	Home Phone () Work ()
Current Mailing Address (If different from above)		City	State	Zip Code	Cell phone () Fax Number () E-mail: _____
H.S. or College attending		City	State	Zip Code	Previous IHC Scholarship Recipient Yes () No () Year _____
Student's classification High School: Graduating senior () High school graduate () Class Rank: ___ out of ___ (for example, 10 out of 400) GPA: ___ (Indicate whether grades are based on a scale of 4, 5 or 6) ___ College: Freshman () Sophomore () Junior () Senior () GPA ___ Graduate () GPA: ___				Major field of study (if known):	
Do you speak Spanish Yes () No ()		Where did you learn Spanish? At home () At school () Hispanic country () At work () Other ()			
Number of years you have studied Spanish: High School: ___ College ___ Other ___			Specify previous residence or study in a Hispanic country (if any): Year ___ Country _____		
What percentage of student's college cost will be paid by the following sources: Parents ___ % Student ___ % Savings ___ % Loan ___ % Scholarship ___ % Grants ___ % Other ___ %					

Do you work? Yes () No ()	Hours per week	Income per week \$	Place of Employment and address:
Name of program or institution in the State of Texas where scholarship award will be used:			
Have you applied for another scholarship or grant? Yes () No (). If so, which one(s)?			
Name _____ Total amount \$ _____			
Name _____ Total amount \$ _____			
Have you received any scholarship or grant? Yes () No () If so, which one(s)?			
Name _____ Total amount \$ _____			
Name _____ Total amount \$ _____			
Student's signature: _____ Date: _____			

IMPORTANT:

This application must be accompanied **by two letters of recommendation** on forms provided by the Institute.

Furthermore, official transcript(s) from all the educational institutions the student has attended must be submitted.

1. An official transcript bears the official seal of the school and the signature of a school official.

2. College freshmen should submit high school transcript(s) as well as college transcript(s).

Student should fill out **Section I** of each recommendation form and give it to the recommending instructor. Once the instructor has filled out **Section II** of the form, s/he will put it in a sealed envelope, sign it on the back and return it to the student.

Only applications accompanied by two letters of recommendation and official transcript(s) will be accepted.

List names of recommending instructors:

1. _____

School: _____

2. _____

School: _____

ESSAY

Please write a brief essay (50-100 words) in Spanish or English, summarizing your studies and/or experience in the Hispanic culture. Indicate what you expect to gain from your proposed course of study. Please add a page if necessary.

RECOMMENDATION FOR SCHOLARSHIP

Instructions:

* Student should fill out Section I and then give it to the recommending instructor **at least one week before application deadline.**

The instructor will return it to the student no later than **March 15, 2019

Application deadline: **March 29, 2019**

SECTION I (to be completed by the student*)

Student's name: _____

Student's permanent address: _____

School currently attending: _____

Applicant's acceptance of confidentiality:

I waive my right of access to this recommendation.

I do not waive my right of access to this recommendation.

SECTION II (to be completed by the instructor**)

After you have filled out Section II, please put this form in a sealed envelope, sign it on the back and **return it to the student no later than March 29, 2019**

How long have you known the applicant? _____

In what capacity have you known the applicant?

As a student in one of my classes. Other. Please specify: _____

Please note: Members of the Scholarship Committee may not write a recommendation for this scholarship unless the student indicates that s/he does not have another teacher who knows her/him as well.

Instructor's signature: _____

Instructor's printed name: _____

Title: _____

Educational Institution: _____

Date: _____

Please comment on the following:

Student's achievement in the subject s/he has taken from you.

Student's work habits, maturity, emotional stability, attitude and intellectual ability.

Please indicate the grade or grades (if you are or were her/his teacher) the student received in your class.

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Instructions:

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