

Helping
Other
People
Excel

H.O.P.E.
Scholarship
Application
Form



*“Making a difference
in New Mexico
communities”*

Los Ojos de la Familia H.O.P.E. SCHOLARSHIP

The scholarship is awarded to students with a high level of academic achievement, who exhibit high levels of determination and drive, possess strong leadership skills, and are actively involved in the community.

The LODLF H.O.P.E. Scholarship may award one scholarship each semester up to \$3,000. If there are insufficient applications, or the applications received do not meet the conditions of eligibility an award will not be made for that specified period.

Conditions of Eligibility

Applicants must meet the following criteria in order to be eligible for the LODLF H.O.P.E. Scholarship:

- Be a graduating senior
- Must be a resident of the State of New Mexico or Arizona;
- Have a cumulative, weighted Grade Point Average of at least 3.5 on a 4.0 scale;
- A minimum score of a 25 on the ACT or 1250 on the SAT;
- Be accepted to attend a public two or four-year college/university full-time, a private university, or an accredited vocational/technical school;
- Must have participated in a minimum of 30 hours of community service in the last year;
- Agree to allow your name and photograph to be released for publication; and permit review of this application and enclosed school transcripts by anyone representing the scholarship committee.

Selection Procedures

Members of the Board of Directors will review all applicant documents. Applicants will be ranked by Grade Point Average, amount and nature of community service, strength of letters of recommendation, course of study, and essay quality. The highest ranked applicant(s) will be determined and Interviews will be conducted prior to award being issued.

Only scholarship recipient(s) will be notified of their award. Notification to the recipient(s) will be made in August and January. Payment of scholarship amount will be made directly to the institution.

We may publish certain general information including the winner's name, educational background, community service and future educational plans.

Applicant must not be considered 'family' to a member of the board; family is defined as: include an individual's spouse, ancestors, children, grandchildren, great grandchildren and the spouses of children, grandchildren, and great grandchildren. IRC 4946(d). The spouses of an individual's lineal descendants are also considered family. 26 C.F.R. § 53.4946-1(h). Further, the legally adopted child of an individual is the child of that individual. 26 C.F.R. § 53.4946-1(h)."

Scholarship Conditions

The scholarship may only be used for tuition, fees, books, and room and board. Payments from the LODLF H.O.P.E. Scholarship may be received to supplement benefits from the educational institution, or from other foundations, institutions, or organizations.

Preparation of Materials

General Guidelines:

- Type or print using blue or black ink. Write legibly.
 - Send the application form and all supporting documentation (official transcript, letters of reference, etc.) together in **one envelope**.
 - **Do not** include descriptions of activities, work experience and/or awards not asked for in the application.
 - Contact the Board of Directors assistance@losojosdelafamilia.org with any questions.
1. **Student Information:** Provide your permanent address as indicated on the form. Also provide your home phone number, school phone number, email address, date of birth, gender and country of permanent residence. You must complete all of this information. Incomplete applications will be considered ineligible.

2. **School Information:** Provide the name, address, phone number and expected graduation date for the school or college you are currently attending. If you will be attending a different school in the following academic year, indicate that school's name, address, phone number and expected graduation date. You must complete all of this information.
3. **Grade Point Average (GPA):** You must provide your current, cumulative **weighted GPA on a 5.0 scale**. You must also include an official transcript. If you have attended your current school for less than one year, include a transcript from your previous school as well. Do not have the transcript(s) sent to LODLF separately; the transcript(s) must be included with your application.
4. **Extracurricular Activities:** List all extracurricular activities you have participated in during the last year. Indicate the dates you participated in each activity. Do not include community service activities in this section.
5. **Community Service Information:** You must provide details regarding your community service for each organization you served in the past 12 months. For each separate organization you must provide: the name of the organization, your supervisor at the organization, contact information for your supervisor, total number of hours served, when you participated in the community service, and a description of service. You must also provide your total hours of community service across all of the organizations you served. You must have completed at least **30** hours of community service. Verification of service will be established prior to issuance of the scholarship.
6. **Essay:** Type a 1-2 page, double-spaced essay describing your ***"Personal Story"*** on the following:
 - Describe your Determination, Ambition & Drive;
 - Describe your active community involvement and rationale for selecting the organization;

- Describe how you have overcome adversity in your life;
- Describe your proudest accomplishments.

The essay should be attached to the application form. This is the only guidance for writing the essay.

7. **Letters of Recommendation:** Provide three (3) letters of recommendation: one Personal Reference, one Academic Reference, and one Community Service Reference. The writer of each letter must also complete a Recommendation Form (provided in the application.) It may be useful to explain the scholarship to the writer of your letter so that he/she may tailor it to the qualities important to this scholarship. Submit the letters with your other scholarship documents. Do not mail the letters of recommendation separately from your application packet. The Board of Directors may contact the writers of letters of recommendation with further questions.

IMPORTANT DATES:

Applications must be received by Specified dates on our website

APPLICATION PACKET CHECKLIST:

- Completed Application Form
- Transcript(s)
- Typed Essay
- Three (3) Recommendation Forms with letters of recommendation

**LODLF H.O.P.E. Scholarship
Scholarship Application Form**

This application must be completed in its entirety. Do not leave any spaces blank. Please type or print using blue or black ink. Send all required supporting documentation (official transcript, letters of reference, etc.) with this application form in one envelope to the address below, fax to 505-792-2399, or email in one PDF document to assistance@losojosdelafamilia.org. **Do not send supporting documentation in a separate envelope or at a later time. Incomplete applications will not be processed.** Send completed forms and supporting documentation to:

LODLF H.O.P.E. Scholarship
7916 Ranchitos Loop NE
Albuquerque, NM 87113

Please do not include descriptions of activities, work experience and/or awards not asked for in this application. Only information specifically requested in this application will be considered.

An applicant cannot be related to a member of the Board of Directors.

See the previous pages containing the "Instructions for Applications" for a detailed description of how to complete this application. If you have any questions, please address them to the Board of Directors via email at assistance@losojosdelafamilia.org.

1. Student Information

Name:

First Name

Middle Initial

Last Name

**Permanent
Mailing Address:**

Number, Street, and Apartment Number

City

State

Zip

Home Phone:

School Phone:

(If different than home phone)

Email address:

Date of Birth:

MM/DD/YY

Gender:

Male

Female

Country of Permanent Residence:

Name: _____

2. School Information

Name of School/College
Currently Attending:

Mailing Address:

_____ Number, Street, and Apartment Number

_____ City State Zip

Phone:

Expected Graduation Date:

Name of College Attending
Next Academic Year:

(If different than above)

Mailing Address:

_____ Number, Street, and Apartment Number

_____ City State Zip

Phone:

Expected Graduation Date:

Name: _____

3. Grade Point Average (GPA)

You must have a cumulative, weighted Grade Point Average (GPA) of 3.5 or above on a 5.0 scale to be eligible for this scholarship.

Please include an official, sealed transcript from the high school you are currently attending. If you have attended your current school for less than one year, then also include an official, sealed transcript from your previous school.

Current Weighted Cumulative GPA: _____

4. ACT/SAT Score

You must have a minimum score of 25 on your ACT or a minimum score of 1250 on your SAT to be eligible for this scholarship.

ACT: _____ OR SAT: _____

Please provide evidence supporting your score.

Name: _____

5. Extracurricular Activities

Please list all of the extracurricular activities you have participated in during the last year. These activities include participation in sports teams, religious groups, fraternities/sororities, etc. There is a separate section for extracurricular activities related to community service so **do not include** those activities here. Attach additional typed pages if the space provided is insufficient.

Activity	Dates of Participation in Activity
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

Do you currently have a part-time job? Yes No

If Yes, please indicate the number of hours worked per week: _____ and a description of your position, name of your employer, and contact information

Name: _____

6. Community Service Information

You must have a demonstrated interest and enthusiasm for community service. Your dedication to volunteering and helping others must go above the requirements for graduation and must exceed **30** hours in the last year. Use the space below to identify the community service you have performed. List your service to various organizations in descending order of significance. **Be sure to provide the total number of hours you served at each organization in the “Number of Hours Served” space and the total number of hours across all of the organizations in the “Total Community Service Hours” space at the bottom of the page.** Copy this page or attach a typed list if the space provided is insufficient.

Name of Organization: _____

Name of Supervisor: _____

First

Last

Title

Supervisor Phone: _____

Number of
Hours Served:

Dates of
Service:

Description of Service: _____

Name of Organization: _____

Name of Supervisor: _____

First

Last

Title

Supervisor Phone: _____

Number of
Hours Served:

Dates of
Service:

Description of Service: _____

Name of Organization: _____

Name of Supervisor: _____

First

Last

Title

Supervisor Phone: _____

Number of
Hours Served:

Dates of
Service:

Description of Service: _____

TOTAL COMMUNITY SERVICE HOURS (for all organizations): _____

Name: _____

7. Essay

Please write a 1 – 2 page essay on the following topic. The essay should be typed, double-spaced, and attached to this form.

Tell us your “Personal Story”
Describe your determination, drive, and ambition.
Explain your most compelling community service experience.
How has this service changed your life or the recipients?
Describe how you have overcome adversity in your life.
Describe the accomplishments you are most proud of.

8. Letters of Recommendation

Please provide three (3) Letters of Recommendation with this application. One letter must be written by a friend or family member (Personal Reference). One letter must be written by a teacher/professor or counselor (Academic Reference). One letter must be written by someone who knows you through your community service work (Community Service Reference). You may want to explain the scholarship criteria to the writers so that they can appropriately tailor their letter. Please have the writers of your letters of recommendation complete the following appropriate Recommendation Form and attach their letters.

Recommendation Form – Personal Reference

Please complete the following form and attach your typed recommendation. Please return this completed form and your letter of recommendation to the applicant in a sealed envelope.

Name of Applicant

First Name

Last Name

Your name:

First Name

Last Name

Title:

Address:

Number, Street, and Apartment Number City

State

Zip

How long have you known the applicant?

In what capacity have you known the applicant?

Please check whether you feel that the applicant is below average, average, good, very good or excellent for the following characteristics.

Characteristic	Below Average	Average	Good	Very Good	Excellent
Responsibility					
Compassion					
Leadership					
Motivation					
Work Habits					
Independence					
Initiative					
Potential for Growth					

Recommendation Form – Academic Reference

Please complete the following form and attach your typed recommendation. Please return this completed form and your letter of recommendation to the applicant in a sealed envelope.

Name of Applicant

First Name

Last Name

Your name:

First Name

Last Name

Title:

Address:

Number, Street, and Apartment Number City

State

Zip

How long have you known the applicant?

In what capacity have you known the applicant?

Please check whether you feel that the applicant is below average, average, good, very good or excellent for the following characteristics.

Characteristic	Below Average	Average	Good	Very Good	Excellent
Responsibility					
Compassion					
Leadership					
Motivation					
Work Habits					
Independence					
Initiative					
Potential for Growth					

Recommendation Form – Community Service Reference

Please complete the following form and attach your typed recommendation. Please return this completed form and your letter of recommendation to the applicant in a sealed envelope.

Name of Applicant

First Name

Last Name

Your name:

First Name

Last Name

Title:

Address:

Number, Street, and Apartment Number City

State

Zip

How long have you known the applicant?

In what capacity have you known the applicant?

Please check whether you feel that the applicant is below average, average, good, very good or excellent for the following characteristics.

Characteristic	Below Average	Average	Good	Very Good	Excellent
Responsibility					
Compassion					
Leadership					
Motivation					
Work Habits					
Independence					
Initiative					
Potential for Growth					