

Lake County Chamber of Commerce ***Si Se Puede Hispanic Scholarship Program***

Qualifications

- A graduating High School Senior
- Planning to enroll in college in the fall 2010
- A citizen or permanent resident of the US
- Of Hispanic / Latino descent (at least one parent)
- Minimum 3.0 GPA (on 4.0 scale)

Submit the following materials

- Scholarship Application
- Essay
- 2 Letters of Recommendation (written by an instructor, community member or employer)
- Official transcripts with GPA

Selection Process

Scholarships will be awarded to individuals with outstanding academic, leadership and professional qualities who have demonstrated a strong commitment to the cultural, economic, educational, or social advancement of the Latino community in their application and essay. Consideration is also given to the economic status of the applicant. Applicants who are selected will be notified by phone or mail to schedule an interview. It is important to note that the Lake County Chamber of Commerce's decisions will not be subject to appeal by the applicant or any other party.

I, _____(name), certify that the information I have provided the Lake County Chamber of Commerce ó Hispanic Scholarship Committee is accurate to the best of my knowledge and understand that providing misleading information can result in the organization's refusal to consider my application or, if awarded the scholarship, withhold funds.

Signature _____

Date _____

All *Si Se Puede* Scholarship applications must be received by March 1st 2010. Please mail to

Lake County Chamber of Commerce
Si Se Puede Hispanic Scholarship Committee
5221 W. Grand Ave
Gurnee, IL 60031

Extra Curricular Activities

Please describe any service or volunteer activities you have participated in during the last 12 months.

Organization Name	Activity/Position(s) Held	Dates	Hrs / Weeks
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Financial Information

Who lives in your household (parents, brotherø sisters, etc.)? _____

Did anybody claim you on their previous yearø tax returns?

- Yes No

Will anybody else in your household be attending college during the same academic year?

- Yes No

If your answer is yes, please provide further information for each individualí

Name *Age* *Relationship* *College/University* *Full/Part-time*

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Essay Question

Please answer the following essay question. Your response should be typed in 12-point font and at least 1½ spaced and at least 500 words. Applicants are asked to proof read their essays – paying close attention to spelling, punctuation, and content – before submitting application materials. It is important to note that essays that do not meet the requirements will not be considered and may result in the applicants being disqualified from scholarship consideration by the Lake County Chamber of Commerce Hispanic Scholarship Committee.

What personal and academic qualities do you think make you a particularly deserving candidate for the Lake County Chamber of Commerce Hispanic Scholarship? (Feel free to describe an academic or personal challenge you recently overcame, a project that required creativity or the ability to think critically, or an experience that you believe has contributed significantly to your personal and/or academic development).

Lake County Chamber of Commerce
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 Recommendation Form

It is the applicant's responsibility to ensure that the recommender completes the form and writes a recommendation. Applicants are encouraged to request their Letter of Recommendation well before the deadline and instruct the recommender to place the Recommendation Form and Letter of Recommendation in a sealed envelope with their signature across the back flap. **Applications that include letters that are not sealed with the recommender's signature across the back flap or do not include the designated number of recommendations will be considered incomplete, disqualifying the applicant from consideration.**

Dear Recommender: The individual requesting a Letter of Recommendation is applying for the Lake County Chamber of Commerce *Si Se Puede Hispanic* Scholarship. Please complete the following form and write a recommendation on their behalf, describing his/her personal and academic qualities and whether or not you believe he/she is a good candidate. **After completing the form and writing your recommendation, please seal both in an envelope with your signature across the back flap and return to applicant.**

Recommender Information	
Name _____	School/company/organization _____
Title _____	Contact Phone _____
E-Mail Address _____	

How do you know the applicant?							
Student	<input type="checkbox"/>	Employee	<input type="checkbox"/>	Volunteer	<input type="checkbox"/>	Other	<input type="checkbox"/>
How long have you known the applicant?							
<input type="checkbox"/>	Less than 1 year	<input type="checkbox"/>	More than 1 year	<input type="checkbox"/>	More than 2 Years	<input type="checkbox"/>	4 + Years
How would you rate the applicant in the following areas?							
	Excellent	Very Good	Average	Below Average	Do Not Know		
Academic Capacity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Leadership Qualities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Community Involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		