Indiana Latino Institute
Scholarship 2016-2017

Purpose:
The Indiana Latino Institute scholarship was created as a means to address the underrepresentation of Latinos in post-secondary education. The goal is to encourage Latino students in Indiana to pursue higher education and engage in community service. In order to accomplish this goal the ILI will provide scholarships for the 2016-2017 academic year.

Eligibility:

- Students applying to or currently enrolled at any college or university in the state of Indiana
  - Student must be planning to enroll in a minimum of 6 credit hours per semester
  - Student must be a high school senior, college freshman, sophomore, junior, or senior
  - Student must be between the ages of 17 and 25
- Demonstrate academic achievement (minimum 2.5 GPA on 4.0 scale)
- Demonstrate financial need (complete financial need form)
- Document ongoing community service involvement
- Preference given to Latino students residing in Indiana who are first-generation college or non-traditional students

Deadline:

All application materials including the essay, letters of recommendation, official transcripts and all other requirements must be postmarked and mailed to the address below by May 31, 2016.

Notification:

Award letters will be sent to scholarship recipients by June 30, 2016.

Send Applications to:

Attn: Indiana Latino Institute Scholarship Committee
Indiana Latino Institute
401 W. Michigan Street, Suite, 100
Indianapolis, IN 46202

Questions about the scholarship should be directed to Ivette Olave at iolave@indianalatino.com or (317) 472-1055
Indiana Latino Institute  
Scholarship Application Form 2016-2017

<table>
<thead>
<tr>
<th>APPLICANT INFORMATION</th>
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<tbody>
<tr>
<td>Full Name:</td>
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<tr>
<td>Date of birth:</td>
</tr>
<tr>
<td>Ethnicity/Latino Heritage:</td>
</tr>
<tr>
<td>Current address:</td>
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<tr>
<td>City:</td>
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<td>Telephone:</td>
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<tr>
<th>EMERGENCY CONTACT</th>
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<tbody>
<tr>
<td>Name:</td>
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<tr>
<td>Address:</td>
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<tr>
<td>City:</td>
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<tr>
<td>Relationship:</td>
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<tr>
<th>EDUCATIONAL BACKGROUND</th>
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<tbody>
<tr>
<td>Name of school currently attending or enrolled:</td>
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<tr>
<td>Address:</td>
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<tr>
<td>Expected Graduation Date:</td>
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<tr>
<td>Did you attend the 2016 Indiana Latino Legislative Summit?</td>
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<tr>
<td>Are you a first generation college student?*</td>
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*First generation college student is defined as the first in your family to receive a degree from an accredited college or university. Family includes parents and grandparents, etc. Family for this purpose does not include other lines of descent such as aunts, uncles, or step parents. Siblings are also not included. For example, in one family, there may be three first generation college students who are siblings.

Have you applied for/received any other scholarships/financial aid? If so, please list it on a separate piece of paper and specify if (A) applied or (R) received and provide amounts. If you have applied for financial aid, please include a copy of FAFSA.

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<tr>
<th>COMMUNITY SERVICE AND EXTRACURRICULAR ACTIVITIES</th>
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<tbody>
<tr>
<td>Please list on a separate piece of paper any community service or volunteer work, participating clubs, sports, work, etc. Be sure to include dates of involvement and time commitment to each activity. List community service first and be sure to properly identify each activity as either volunteer or paid.</td>
</tr>
</tbody>
</table>

I have read and understand all the instructions contained in this application. I certify that all the information I have provided is complete and accurate to the best of my knowledge. I understand that the falsification of any information may result in the termination of a scholarship if one is granted to me.

*Also, I understand that if I receive a full-ride scholarship I will notify ILI staff immediately, failure to do so will result in disqualification from the scholarship pool of applicants and or recipients. (*Students who have received or will be receiving a “full-ride” or 100% full tuition scholarship from an institution, organization, business, or other party become ineligible to receive the Indiana Latino Institute scholarship.)

Applicant Signature____________________________________Date______________________
ILI FINANCIAL NEED FORM 2015-2016

Section Student Information:
Student’s name: ____________________________________________ Age: _______________
Home address: _________________________________________________________________
High School: __________________________________________________________________
What college or university are you planning to attend? ________________________________

Section B — Household Information:
Number of family members who live at the above home address: __________ (Include student even if
he or she does not live at home. Include parents and other dependent children of parents).

Indicate the ages and your relationship with all the people living in your household: (F=father,
M=mother, A=applicant, B=brother, S=sister, G=Grandparent, A=Aunt, U=Uncle, C=Cousin
1. ______ 2. ______ 3. ______ 4. ______ 5. ______ 6. ______ 7. ______ 8. ______
How many of the above family members will attend college as a full-time undergraduate student
during this academic year 2015 - 2016? _______
Father’s age: _________________ Mother’s age: __________________

Section C — Household Current Information: (Do not leave these items blank; enter zeros, if appropriate
indicate if income is earned weekly, bi-weekly, monthly, or annually).
Income earned from work by father: $ _______________ weekly
Income earned from work by mother: $ _______________ weekly
Total income earned from both parents: $ _______________ total

Section E — Applicant’s Educational Financial Resources during this Academic Year:
Contribution from parents: $ _______________
Government or private scholarship(s): $ _______________
Support from sponsors: $ _______________
Support from relatives: $ _______________
Contribution from student (employment): $ _______________
Other (please identify source): $ _______________

I understand that the information on this form is true, correct and complete. I understand that any
misrepresentation may be cause for refusing or revoking the granted scholarship.

Signatures: ____________________________________________ (Student) (Date signed)

Signatures: ____________________________________________ (Parent) (Date signed)
Checklist:

- Completed application form
- (1) essay
- Transcript of Grades: Include an official transcript in a sealed envelope from your high school or college.
- Letter of Recommendation:
  Please include (1) letter of recommendation from a teacher/professor, guidance counselor/advisor, or community service supervisor in a sealed envelope.
- If you have applied for financial aid, include a copy of your FAFSA or SAR.
- Complete the ILI Financial Need Form.
- All items in one envelope properly addressed to ILI and postmarked no later than May 31, 2016.