

**State Council Cabrillo Civic Clubs of California, Inc.**  
**Scholarship Committee**



Application for an Undergraduate Scholarship

**INSTRUCTIONS:** Applications will be received at the office of the Chairperson of the State Scholarship Committee between **January 1st and March 15th** of the year of application. Applications must be **postmarked no later than March 15<sup>th</sup>**. Submit applications to the following address:

**Jacqueline Austin**  
 State Scholarship Chairperson  
 472 Paradise View Drive  
 Vista, CA 92083  
 Phone: (760) 390-4094  
 E-mail: [cabrillo.scholarship@gmail.com](mailto:cabrillo.scholarship@gmail.com)

Application must be fully completed, or applicant will be disqualified. Applications will not be accepted or considered if the required documents are not attached and the following requirements are not met:

1. Applicants must be of **Portuguese descent** and be a **USA citizen** or **permanent resident**.
2. Applicant must have maintained a minimum **3.50 Total Weighted Grade Point Average for Grades 9 -12** and be a graduating Senior of a California high school.  
*(An official High School Transcript must accompany the application)*
3. Applicant meets all entrance requirements of the accredited community college, college, trade school or university the applicant plans to attend.
4. Applicant must have participated in at least **three(3) extra-curricular activities** while in high school.
5. Applicant must present **one(1) letter of recommendation** from an individual who will vouch for the applicant's academic standing, character, personality, and extra-curricular activities. The letter of recommendation must be from the **Principal, Dean, Counselor, or Teacher of the high school currently attending**.
6. Applicants must complete the Application for an Undergraduate Scholarship, including the essay.

Awards are made on a competitive basis, with consideration being given to the following categories: GPA, Leadership, Extra Curricular Activities, Work (Paid or Volunteer), Promise, and Membership in Cabrillo Civic Clubs. The intent of the donors of this fund is to assist students of Portuguese descent who have a desire to secure a higher education.

Scholarships in the amount of **\$500.00** each will be awarded to Scholarship Recipients upon **Verification of Enrollment** in an accredited community college, college, trade school, or university.

Each applicant will be notified by June 30<sup>th</sup> of the status of their application. Additionally, those applicants who are awarded a scholarship will receive award instructions for collecting the scholarship.

This application is for the use of applicants applying for admittance into any accredited community college, college, trade school, or university in the U.S.A.

The following information, together with the statements made by the Applicant is for the Cabrillo Civic Clubs of California Scholarship Committee only and will be kept strictly confidential.

## Application for an Undergraduate Scholarship

20\_\_ \_\_

Name \_\_\_\_\_ Home Phone (\_\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_  
(Full Name)

Cell Phone (\_\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_  
\_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Years at location \_\_\_\_\_

Email: \_\_\_\_\_ County High School is located in \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Birthplace \_\_\_\_\_

American Citizen \_\_\_\_\_(Yes, No) (If NO, are you a permanent resident) \_\_\_\_\_ (Yes, No)

Parents or guardians are a Cabrillo member \_\_\_\_\_ (Yes, No) Club # \_\_\_\_\_

Name of High School \_\_\_\_\_ Date of Graduation \_\_\_\_\_

Father's Full Name \_\_\_\_\_ National Descent \_\_\_\_\_

Mother's Full Name \_\_\_\_\_ National Descent \_\_\_\_\_

Mother's Maiden Name \_\_\_\_\_

Parents are: \_\_\_\_\_ Married \_\_\_\_\_ Single \_\_\_\_\_ Divorced \_\_\_\_\_ Widowed

*For Committee Use Only - - DO NOT WRITE IN THIS SPACE - -*

---

Is the Applicant a Life Member of C.S.F. \_\_\_\_\_(Yes, No) If No, how many semesters \_\_\_\_\_

Number in Applicant's graduating class \_\_\_\_\_ Applicant's rank in class \_\_\_\_\_

Name of College Applicant planning to attend: \_\_\_\_\_

Date of Entrance: \_\_\_\_\_ Major: \_\_\_\_\_  
(i.e., Science, Business, English)

Business or Profession for which Applicant is preparing? \_\_\_\_\_

