



# Sandy Franks Memorial Title VI Senior Scholarship American Indian Scholarship Fund of Southern California

Application (page 1 of 3)

**Requirements: (1) Completed Application, (2) Two Letters of Recommendation (teachers, counselors, employers, or personal friends), (3) One Letter of Recommendation (member of American Indian Community), (4) Current School Transcripts, (5) Proof of current college enrollment, (You must be enrolled in an accredited community college, college or university in Southern California for Fall.) (6) Proof of Tribal membership/enrollment, (7) One-Page Essay (Discussing your challenges, accomplishments, and ambitions for the future.)**

SCHOLARSHIP AWARDED ANNUALLY

Date: \_\_\_\_\_

**DEADLINE TO SUBMIT APPLICATION: April 21, 2020.**

1. Applicant's Name: \_\_\_\_\_ Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
E-mail address: \_\_\_\_\_ Fax # (\_\_\_\_) \_\_\_\_\_
2. Tribe/s: \_\_\_\_\_  
Roll Number: \_\_\_\_\_ Agency Where Enrolled: \_\_\_\_\_
3. Age: \_\_\_\_ Birth Date: \_\_\_\_\_
4. Marital Status (please check): \_\_\_\_ Single \_\_\_\_ Married \_\_\_\_ Separated \_\_\_\_ Divorced  
Number of Children: \_\_\_\_\_ Ages of Children: \_\_\_\_\_  
Spouse Name: \_\_\_\_\_
5. Father's Name: \_\_\_\_\_ Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Occupation: \_\_\_\_\_ Annual Income: \_\_\_\_\_
6. Mother's Name: \_\_\_\_\_ Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Occupation: \_\_\_\_\_ Annual Income: \_\_\_\_\_
7. Guardian's Name: \_\_\_\_\_ Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_
8. Number of Siblings: \_\_\_\_\_ Ages of Siblings: \_\_\_\_\_

Email scanned application to: [aisf.socal@gmail.com](mailto:aisf.socal@gmail.com)

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9. Name of High School: \_\_\_\_\_
10. High School Extracurricular activities/Volunteer Experience: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
11. Present ACCREDITED College/University: \_\_\_\_\_
12. Expected Certificate/Degree upon Completion: \_\_\_\_\_
13. Expected Date of graduation/completion: \_\_\_\_\_
14. **Work Experience:** (Include full-time/part-time) Please attach/include resume if possible.
- Place of Employment: \_\_\_\_\_ Title: \_\_\_\_\_
- Dates of Employment: \_\_\_\_\_ Annual Salary: \_\_\_\_\_
- Duties: \_\_\_\_\_  
\_\_\_\_\_
- Place of Employment: \_\_\_\_\_ Title: \_\_\_\_\_
- Dates of Employment: \_\_\_\_\_ Annual Salary: \_\_\_\_\_
- Duties: \_\_\_\_\_  
\_\_\_\_\_
- Place of Employment: \_\_\_\_\_ Title: \_\_\_\_\_
- Dates of Employment: \_\_\_\_\_ Annual Salary: \_\_\_\_\_
- Duties: \_\_\_\_\_  
\_\_\_\_\_

## PURPOSE OF APPLICATION

15. How will this scholarship money be used? (books, school supplies, insurance, transportation, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**16. Anticipated Expenses:**

Please use this page to fill in estimates of your expected financial resources and expenses for the coming year as accurately as possible. Figures should be based upon income and expenses experience.

**Estimated Total Income for the Coming Year:**

**Estimated Total Expenses for the Coming Year:**

Earnings during the present year ..... _____ Other Scholarships, loans or grants .... _____ Assistance from family/other resource . _____ Spouse's Income. .... _____ Clothing ..... _____ Loan Payments (home/car). .... _____ Any Other Income (explain below). .... _____ _____ _____	Room and Board ..... _____ Tuition and Fees ..... _____ Books and Materials ..... _____ Transportation ..... _____ Personal Incidental ..... _____ Child Care. .... _____ Any Other Expenses (explain below) ... _____ _____ _____
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**Total Income.** ..... \_\_\_\_\_ **Total Expenses.** ..... \_\_\_\_\_

Any financial obligations or liabilities not listed above (credit cards, personal loan): If so, please explain:

\_\_\_\_\_

\_\_\_\_\_

**Certification**

In order to continue my education, as indicated herein,

I submit this application to the AISFSC:

- A. All information submitted in this application is true/correct.
- B. I will notify the AISFSC immediately if there should be any interruption in my plans for continuing my education this coming year.
- C. I understand the information in this application is confidential and will be reviewed only by the AISFSC Board of Directors.
- D. I agree to allow my name to be listed as a recipient of the American Indian Scholarship Fund of Southern California.

**Final Checklist**

- Completed Application*
- Two Letters of Recommendation*
- One Letter of Recommendation*
- Current School Transcripts*
- Proof of current college enrollment*
- Proof of Tribal mbsp/enrollment*
- One-Page Essay*

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date