

Application Directions

- 1. Follow the checklist on the last page of the application:**
- 2. Fill out the application.**
- 3. Put applicant's name on each page, including attachments**
- 4. Fill out Income and Expenses page, including information on contributions by parents, family, tribe, and other grants received or anticipated.**
- 5. Write your essay so we can know you better, and how you plan to give back to our community.**
- 6. Paper forms can be scanned and then emailed to aisf.socal@gmail.com**
- 7. On-line applications should include uploads of all attachments, including college enrollment, tribal enrollment, letters of recommendations, transcripts and essay.**

Questions? Email aisf.socal@gmail.com



American Indian Scholarship Fund of Southern California

21084 Entrada Rd, Topanga, CA 90290

Application (page 1 of 3) Date: _____

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 currently enrolled in an accredited community college, college or university in Southern California.) (6) *Proof of Tribal membership/enrollment*, (7) *One-Page Essay* (Discussing your challenges, accomplishments, and ambitions for the future.) (8) Applicants name is required on every page submitted for scholarship consideration.

SCHOLARSHIPS AWARDED SEMIANNUALLY

Application envelopes must be postmarked no later than June 30 or Dec. 31 for consideration.

1. Applicant's Name: _____ Street Address: _____
City: _____ Zip Code: _____ Phone: (____) _____
E-mail address: _____ Fax # (____) _____
Applicant's Occupation: _____ Applicant's Annual Income: _____
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: _____
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

American Indian Scholarship Fund of Southern California

Application (page 2 of 3) NAME: _____

9. Name of High School: _____ Year Graduated: _____

10. High School Extracurricular activities/Volunteer Experience: _____

11. Present ACCREDITED College/University: _____

12. Previous College/University: _____

13. College Extracurricular activities/Volunteer Experience: _____

14. Expected Certificate/Degree upon Completion: _____

15. Expected Date of graduation/completion: _____

16. **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

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

American Indian Scholarship Fund of Southern California

Application (page 3 of 3) NAME: _____

18. 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. _____ Veteran's Benefit. _____ Social Security. _____ Welfare Benefit _____ Alimony. _____ Any Other Income (explain below). _____ _____ _____ Total Income. _____ | Room and Board _____ Tuition and Fees _____ Books and Materials _____ Transportation _____ Clothing _____ Personal Incidental _____ Loan Payments (home/car). _____ Child Care. _____ Any Other Expenses (explain below) ... _____ _____ _____ 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 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 mnbsp/enrollment*
- One-Page Essay*
- Name included on every page?*

Applicant Signature

Date