

#### **ELIGIBILITY REQUIREMENTS**

To be eligible for scholarship consideration, applicants must:

- Be a current senior and graduate from a public high school in Los Angeles County by June 2024
- Have a 3.5 grade point average or higher (cumulative unweighted)
- Attend a 2- or 4-year university in 2024-2025
- Plan to pursue degrees or careers in fields such as government, public administration, and public policy.
- Have a demonstrated financial need

#### **SELECTION CRITERIA**

Applicants will be evaluated on the following criteria:

- Interest in pursuing studies and a career in public service
- Community awareness
- Financial need

#### **APPLICATION AND SCHOLARSHIP TIMELINE**

- Application Open: February 15, 2024
- Application Deadline: April 5, 2024, by 11:59 pm PST
- Scholarship Award Disbursements: No later than August 1, 2024

#### AWARDS AND SCHOLAR RESPONSIBILITY

Selected students, known as Alegria Scholars, will receive up to \$1,000 towards their college tuition for the 2024-2025 school year. Award disbursement can be made directly to students or sent to their college/university.

Scholars agree to send a thank-you letter to the Greater Los Angeles Education Foundation no later than April 5, 2024. The letter should express gratitude for the award and explain its impact on the student.

#### **QUESTIONS**

Contact Kerry Franco at the Greater Los Angeles Education Foundation at <a href="mailto:kfranco@greaterlaedfund.org">kfranco@greaterlaedfund.org</a> or (323) 455-7071.



#### **APPLICATION PACKET CHECKLIST**

Applicants must submit a completed scholarship application packet by <a href="mailto:11:59">11:59</a> pm PST on April 5, <a href="mailto:2024">2024</a>, to <a href="mailto:kfranco@greaterlaedfund.org">kfranco@greaterlaedfund.org</a>. Incomplete and/or late applications will not be considered.

Completed	Task
	Application Form
	Transcript of Grades and/or documentation of good academic standing
	A copy of the transcript may be included in the application packet and
	emailed by the applicant or may be sent separately by your high school
	to kfranco@greaterlaedfund.org
	Essay
	Tell us why you are interested in pursuing studies in public service and
	how you plan to use your training/education to support your
	community. (1,000-word limit)
	Financial Short Answer & Copy of the Student Aid Report from the FAFSA
	Describe your current financial situation and how it will affect your
	educational experience. (500-word limit)
	One (1) Letter of Recommendation
	Letter from a teacher or administrator, responsible member of the
	community, or employer is acceptable. Letter can be emailed from the
	recommender with the SUBJECT line: Letter of
	Recommendation_(Student LAST NAME) to
	kfranco@greaterlaedfund.org

#### **SIGNATURE**

To the best of my knowledge, I certify that the information on this application is accurate and complete and that the signature below is valid. I also certify that the information contained in this application will be made available to the scholarship selection committee.

Signature:	Date:	
Print Name:		



#### **APPLICATION FORM**

Name:			
Address:			
Email:			
Phone:			
(Home)	(Cell)		
Date of Birth:			
SCHOOL INFORM	ATION:		
High School:			
GPA (cumulative			
unweighted):			
Intended College			
Major:			
AWARDS AND HO	ONORS:		
Name:		Date Received:	
Description:			
Name:		Date Received:	
Description:			

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Name:	Date Received:
Description:	
Name	Data Bassiyadı
Name:	Date Received:
Description:	
Name:	Date Received:
Description:	



## **CLUBS/TEAMS/OTHER ACTIVITIES:**

Name:
When did you participate?
Did you hold a leadership position? If so, what was your role?
Description:
Name:
When did you participate?
Did you hold a leadership position? If so, what was your role?
Description:

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### **COMMUNITY SERVICE:**

Name:
When did you participate?
Did you hold a leadership position? If so, what was your role?
Description:
Name:
When did you participate?
Did you hold a leadership position? If so, what was your role?
Description:

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## WORK EXPERIENCE/INTERNSHIPS/SUMMER PROGRAMS/OTHER:

Employer/Organization:
Date of Employment or Involvement:
Avg. Weekly Hours:
Position/Role:
Employer/Organization:
Date of Employment or Involvement:
Avg. Weekly Hours:
Position/Role:
Employer/Organization:
Date of Employment or Involvement:
Avg. Weekly Hours:
Position/Role:

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## **FAMILY/FINANCIAL INFORMATION:**

Parent 1:
Address:
Occupation:
Name of Employer:
Employer Address:
Gross Annual Income:
Parent 2:
Address:
Occupation:
Name of Employer:
Employer Address:
Gross Annual Income:
Number of Dependents supported by Head of Household:
List School Age dependents and their ages:



#### STUDENT ESTIMATED INCOME & EXPENSES FOR THE FIRST YEAR:

Anticipated Student Income	Total	<b>Anticipated Student Expenses</b>	Total
Savings on Hand for College		Tuition and Fees	
Student Earnings in College		Room and Board	
Parent Family Contribution		Books and Equipment	
Other Financial Assistance		Travel Expenses	
Miscellaneous Income		Miscellaneous Expenses	
Total Income Available		Total Expenses Anticipated	

Are there any special circumstances which affect your or your family's ability to meet your college expenses?

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