



Luso-American Education Foundation

7080 Donlon Way, Suite#200, Dublin, CA 94568

Phone: (925) 828-3883 Fax: (925) 828-4554

Email: education@luso-american.org

Website: <http://www.luso-american.org/laef.php>

LUSO-AMERICAN FRATERNAL FEDERATION SCHOLARSHIP APPLICATION

✓ **ALL** CATEGORY "A" SCHOLARSHIP APPLICANTS MUST BE LUSO-AMERICAN LIFE INSURANCE SOCIETY (LALIS) OR LUSO-AMERICAN FRATERNAL FEDERATION (LAFF) SOCIETY MEMBERS AND POLICY HOLDER IN GOOD STANDING FOR A MINIMUM OF 2 YEARS

Council # _____, since _____. My Policy number is _____ (required).

✓ **ALL** CATEGORY "A" SCHOLARSHIP APPLICANTS MUST BE HIGH SCHOOL GRADUATING SENIORS

Check ALL Scholarships for which you qualify:

☐ **A-1 - LAFF YOUTH MEMBERSHIP SCHOLARSHIP**

Applicants of A-1 must meet **ALL** of the following requirements:

- ✓ Enrolled to begin classes at a community college, trade school, or four year College/ University
- ✓ Has a minimum GPA of 2.5

☐ **A-2 - JOAQUIM PEREIRA MEMORIAL SCHOLARSHIP**

Applicants of A-2 must meet **ALL** of the following requirements:

- ✓ Enrolled to begin classes at a four year College/ University
- ✓ Has a minimum GPA of 3.5
- ✓ Active Fraternal member

☐ **A-4 - ANTÓNIO MATTOS MEMORIAL SCHOLARSHIP**

Applicants of A-4 must meet **ALL** of the following requirements:

- ✓ Resident of Sacramento or East Bay Area (CA)
- ✓ Enrolled to begin classes at a four year College/ University
- ✓ Has a minimum GPA of 3.0
- ✓ Excelled in a sport during their four years in high school
- ✓ Active in the Fraternal community

☐ **A-5 - RYAN "MUNCHIE" MEMORIAL SCHOLARSHIP**

Applicants of A-5 must meet **ALL** of the following requirements:

- ✓ Held local or State Youth Office
- ✓ Member of Youth Council #24
- ✓ Enrolled to begin classes at a four year College/ University
- ✓ Has a minimum GPA of 3.5
- ✓ Active in the fraternal community

Applicants of A-5 must meet at least **ONE** of the following requirements:

- ⇒ Participated in Fraternal Youth activities for 2+ years
- ⇒ Performed at State Conventions Be preparing for a professional career where the use of the Portuguese language is useful
- ⇒ Working towards a B.A. or higher degree in Portuguese studies

☐ **A-7 - FRANK DIAS MEMORIAL SCHOLARSHIP**

Applicants of A-7 must meet **ALL** of the following requirements:

- ✓ Enrolled as a full time student at a community or four year College/ University
- ✓ Active Fraternal member

INSTRUCTIONS:

1. Complete application by printing (in pen) or typing all information requested.
2. Submit an official transcript of all completed high school work and SAT/ACT scores (if applicable). These must be issued and certified by a school official, along with a completed Student Counselor Report (see attached form).
3. Request a letter of recommendation be submitted directly from two individuals who can speak of your character and/or financial needs. Each letter of recommendation must be submitted with a Letter of Recommendation Cover Sheet (see attached forms).
4. Submit a recent wallet size photo of yourself (no photo copies).

Note: All materials pertinent to this application must be postmarked by FEBRUARY 15TH. Mail your completed application to:

**LUSO-AMERICAN EDUCATION FOUNDATION
7080 DONLON WAY, SUITE#200, DUBLIN, CA 94568**

For Office Use Only. DO NOT WRITE BELOW THIS LINE.

☐ Completed Application ☐ Official Transcript ☐ Student Counselor Report

Weighted GPA _____ SAT _____ ACT _____

Letters (2) of Recommendation: _____ Date Received _____

Letters (2) of Recommendation Cover Sheets: _____ ☐ Photo Revised 09/2016

Name: _____
Home Address: _____
High School: _____

Home Phone: () _____
Cell Phone: () _____
Email: _____
Graduation Date: _____

City _____ State _____ Zip _____
City _____ State _____ Zip _____
City _____ State _____ Zip _____

PART I: PERSONAL INFORMATION

Full Name: _____ Gender: ☐ Male ☐ Female
First Middle Last

Are you an official resident of the United States of America? ☐ Yes ☐ No

Date of Birth: _____ Age: _____ Birthplace: _____

Father's Name (Guardian) Birthplace Occupation

Mother's Name (Guardian) Birthplace Occupation

Members living in your household (relationship and age): _____

Language(s) spoken at home: _____

PART II: COLLEGE INFORMATION

List the Community or four year Colleges/ Universities to which you have applied:

Planned coursework / major: _____

Profession or career you plan to pursue: _____

PART III: FINANCIAL INFORMATION

Have you applied or plan to apply for FAFSA (*Free Application for Federal Student Aid*)?

☐ Yes ☐ No - If "yes", enter your EFC Number (*Expected Family Contribution*) _____

Do you plan to work while attending college: ☐ Yes ☐ No

I will live... ☐ At home ☐ On campus ☐ Off Campus (*Explain*) _____

Other family members attending college (age, relationship): _____

Please indicate if you or your family have special circumstances that impact your financial situation. _____

All materials pertinent to this application must be postmarked by **FEBRUARY 15TH.**



PART IV: LIST ANY COURSEWORK COMPLETED AT COLLEGES/ UNIVERSITIES OR SUBMIT COLLEGE TRANSCRIPTS:
Use separate sheets, if needed.

NAME OF SCHOOL

DATES OF ATTENDANCE

COURSES TAKEN

PART V: LIST WORK EXPERIENCE:
Use separate sheets, if needed.

DATES

EMPLOYER

LOCATION

TYPE OF WORK

PART VI: INDICATE YOUR PORTUGUESE LANGUAGE SKILL LEVEL IN THE AREAS OF UNDERSTANDING, SPEAKING, READING AND WRITING BY CIRCLING YOUR SKILL LEVEL WITHIN EACH CATEGORY:

Understanding Portuguese	None	Novice	Beginning	Intermediate	Proficient	Fluent
Speaking Portuguese	None	Novice	Beginning	Intermediate	Proficient	Fluent
Reading Portuguese	None	Novice	Beginning	Intermediate	Proficient	Fluent
Writing in Portuguese	None	Novice	Beginning	Intermediate	Proficient	Fluent

PART VII: EXTRACURRICULAR ACTIVITIES:

Describe any activities in sports, clubs and/or organizations in which you participated, including Portuguese community activities. **Use separate sheets, if needed.**

How did you hear about this scholarship?

All materials pertinent to this application must be postmarked by **FEBRUARY 15TH.**



Write a personal statement presenting past and present financial circumstances, future plans, aspirations, goals, and any details you think would help the Scholarship Evaluation Committee make its decision. Please include additional information about your involvement in school and community activities, particularly activities relating to the Portuguese community, when applicable. **Attach separate pages, if needed.**

[illegible]

Applicant's Signature

Date

Parent/Guardian's Signature (if under 18 years of age)

Date



All materials pertinent to this application must be postmarked by *FEBRUARY 15TH*.

Student Counselor Report

Name of Applicant: _____

1. Please describe any factors in the student's environment which may affect his/her performance. Examples might be part-time employment, frequent school transfers, and divorced parents. Please mention any personal, emotional, financial, social or cultural problems, and any physical handicaps which may have significantly influenced his/her educational record.

2. Please enter test scores below:

SAT _____

ACT _____

PSAT / NMSOT _____

GPA (not weighed with honors points) _____

GPA (weighed with honors points) _____
(Must include 1st semester of 12th grade)

Sr. Awards Ceremony Date: _____ Time: _____

3. Do you believe the student's test scores represent their ability and/or achievement? If not, could you suggest a reason for this discrepancy?

4. Additional comments which may provide the Foundation with a more complete picture of the student.

Signature _____

Title _____

Mail official transcript, SAT/ACT scores, and Student Counselor Report to:

LUSO-AMERICAN EDUCATION FOUNDATION
7080 DONLON WAY, SUITE #200
DUBLIN, CA 94568



*This report can be completed by either student counselor or person delegated by school administration. It should be mailed directly to the Foundation, together with the student's transcript and SAT/ACT scores on or before **FEBRUARY 15TH**. If officially sealed in envelope, this report can be given to student for submission with application.*



Letter of Recommendation Cover Sheet (to be completed by each recommender)

Complete and mail to:

Luso-American Education Foundation
Scholarship Committee
7080 Donlon Way, Suite #200
Dublin, CA 94568

Date: _____

Name of Recommender: _____

Contact Information: _____

Cover sheet must be postmarked by ***February 15th***, with letter of recommendation.

Name of Applicant: _____

STUDENT EVALUATION: Please evaluate the student applicant on the chart below:

	BELOW AVERAGE	AVERAGE	UPPER 25%	UPPER 10%	UPPER 5%	DON'T KNOW
Maturity						
Judgment						
Ethics, code of personal conduct						
Attitude toward authority						
Attitude toward constructive criticism						
Awareness of responsibilities						
Ability to meet responsibilities						
Ability to make decisions						
Ability to meet deadlines						
Ability to work under pressure						
Emotional stability						
Ability to work with others						
Drive to achieve						
Leadership in extracurricular activities						

On what do you base your evaluation of the applicant? Please check all that apply:

☐ Personal acquaintance

☐ School records

☐ Instructors' report



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