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| **University of the philippines alumni association of wisconsin**  **(upaa-w)**  *Visit us at* [*https://upaaw.org/*](https://upaaw.org/)  College Scholarship Application Form |  |

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| Applicant Information | | | | | | | | | | | | | | | | | | | | | | | |
| Last Name | |  | | | | | | | First | | |  | | | M.I. | | |  | | | Date of Birth | |  |
| Street Address | | | |  | | | | | | | | | | | | | Apartment/Unit # | | | | |  | |
| City |  | | | | | | | | State | | |  | | | | ZIP | | | |  | | | |
| Home Phone | | |  | | | Mobile Phone | | | | |  | | | Email | |  | | | | | | | | |
| High School | | |  | | | | | | | | | | | | | | | | | | | | |
| Parent/Guardian | | | | |  | | | | | P/G Phone | | |  | | | P/G Email | | |  | | | | |
| Parentage (*Describe the extent of your Filipino parentage):* | | | | | | | | | | | | | | | | | | | | | | | |
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| academics | | | | | | | | | | | | | | | | | | | | | | | |
| *Please submit a copy of your high school transcript and your latest ACT/SAT scores. Also, submit a copy of Acceptance/Admission to the chosen school.* | | | | | | | | | | | | | | | | | | | | | | | |
| Major field of study, if designated | | | | | | | |  | | | | | | | | | | | | | | | |
| Scholarship(s) received for freshman year | | | | | | |  | | | | | | | | | | | | | | | | | |
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| work history | | | | | | | | | | | | | | | | | | | | | | | |
| List part-time jobs, beginning with the most recent (indicate hours per week, if possible): | | | | | | | | | | | | | | | | | | | | | | | |
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| **CO-CURRICULAR HIGH SCHOOL ACTIVITIES** | | | | | | | | | | | | | | | | | | | | | | | |
| *List the significant high school co-curricular activities in which you participated.* | | | | | | | | | | | | | | | | | | | | | | | |
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| community activities | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **HONORS/AWARDS RECEIVED IN HIGH SCHOOL** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **ESSAY** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *The criteria in the evaluation of the essay are clarity, ability to write, maturity, focus, passion, and character. Describe your long-term educational goals, your career aspirations, and personal motivations that drive your pursuit of higher education (250 words or less; type on a separate sheet for more space).* | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **FINANCIAL INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **This section is to be completed by the parent/guardian of the applicant.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Applicant’s Father’s Full Name | | | | |  | | | | | | | | | | | | | | | | Marital Status | | | | | |  | |
| Address/City/State/Zip: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Home Phone |  | | | | | | | Mobile Phone | | | | |  | | | | Email | | | | |  | | | | | | |
| Occupation |  | | | | | | | | | Place of Employment | | | | |  | | | | | | | | | | Years Employed | | |  |
| Applicant’s Mother’s Full Name | | | | | | |  | | | | | | | | | | | | | | Marital Status | | | | | |  | |
| Address/City/State/Zip: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Home Phone | |  | | | | | | | Mobile Phone | | | | |  | | | | Email | | | | |  | | | | | |
| Occupation | |  | | | | | | | | | Place of Employment | | | | |  | | | | | | | | | Years Employed | | |  |
| Number of dependent children in the family | | | | | | | | | | | |  | | | | | | | Other dependents | | | | | | |  | | |
| Dependent children who will be in post-high school institutions next year | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| **Please provide a person to contact to clarify/verify applicant’s and parents’ data:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name/Home or Mobile Phone: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |

**To be completed by parent/guardian of the applicant, if applicable:**

It is my understanding that financial need is one of the criteria used in selecting the recipient of a ***UPAA-W College Scholarship***. For the express purpose of qualifying for such a scholarship on behalf of my son/daughter, I hereby declare to you the following statement of my financial condition as of the \_\_\_\_\_\_\_\_\_\_\_\_\_ and as to other facts relating thereto, all of which I hereby guarantee to be true and correct. . I agree to notify the UPAA-W of any changes in my financial conditions that occur by **August 15, 2022.**

Date \_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please attach at least 1 of the following forms to prove financial need:**

* **1040 Tax Return (2020) with your application**
* **Official FAFSA-determined EFC and COA**

Is there a person or trust that will be contributing financially to the applicant’s education (i.e. under the terms of a divorce decree, a trust or other arrangements)? Please describe. Please state any unusual circumstances affecting your financial status.

I solemnly affirm that to the best of my ability, the information given is correct. I have not been convicted of a misdemeanor or felony crime. I will notify Joselito U. Conti of the UPAA-W if I receive additional grants/scholarships after this application has been submitted.

Date \_\_\_\_\_\_\_\_\_\_ Applicant’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_ Parent’s/Guardian’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (For applicants under 18 years old)

**Please mail all application materials to:**

**Joselito U Conti**

**1930 W Wells Street**

**Milwaukee, WI 53233-1918**

**Submit application by August 15, 2022. All information contained in this application and supporting documents will be held strictly confidential and accessible only to the members of the UPAA-W Scholarship Committee. The Committee reserves the right to request additional information and/or interview the applicant.**