



LO BELLO
WOMEN'S ASSOCIATION

P.O. Box 782163

San Antonio, Texas 78278-0163

“To Strengthen our Community Through Education”

College/University Scholarship Application

LO BELLO WOMEN'S ASSOCIATION SCHOLARSHIP PROGRAM

The Lo Bello Women's Association Scholarship Program is intended to assist and encourage students in completing and advancing their college education. Thank you for applying for the Lo Bello Women's Association Scholarship Program. We are looking forward to working with each student that is awarded a scholarship during the upcoming year from our organization. The Lo Bello Women's Association will review the scholarship applications and will determine the scholarship awardees by June 30. Everyone that submitted an application will be notified by e-mail stating the results of their application.

TERMS: The Lo Bello Women's Association will award a scholarship to qualified San Antonio area students who is enrolled or planning to enroll at a college or university of their choice. The award will be divided into two (2) equal disbursements by September 15 and January 31. Scholarship awards will be sent directly to the recipient's college or university and deposited in the recipient's name. The funds will be allocated towards the payments of tuition, academic fees, the purchase of required educational materials and books. The college or university is the custodian of the funds and will disburse the award as directed and consistent with the purpose and policies of this program. Any expenses for items that are not listed above will be considered the student's responsibility.

ELIGIBILITY REQUIREMENTS:

Applicants must meet the following criteria to be considered for a scholarship:

- High School Senior pending graduation
- Must be a student pursuing full-time studies leading to a bachelor's degree at a college or university of their choice
- For entering freshman, must have a grade point average of at least 2.5 on a 4.0 scale equivalent
- Must maintain a college grade point average of at least 3.0 on a 4.0 grade scale or equivalent
- All applicants must be a U.S. Citizen

- Not over funded from total scholarships and grants awarded

APPLICATION PROCESS: Applicants must complete and submit the following:

FOR NEW APPLICANTS:

- Complete Sections A through N
- Submit OFFICIAL High School Transcript with an authorized signature, seal or stamp
- Submit an acceptance letter of the college/university you plan on attending in the Fall
- Income Tax Returns from the last 3 consecutive years from both parents and/or guardians
- Three (3) letters of recommendation from adults addressed to Lo Bello Women's Association, P.O. Box 782163, San Antonio, Texas 78278-0163. Include a complete name, telephone number and mailing address for each reference. (1) Teacher, (2) Employer or Parent of applicant, (3) Neighbor or Family Friend. Possible inquiry might be needed for processing scholarship application.
- Answer all questions to the best of your ability. Please do NOT leave any questions unanswered. If question is not applicable, explain omission with DOES NOT APPLY.

SELECTION CRITERIA: Write a Personal 500 word essay addressing the following criteria:

- Academic Performance, Writing Ability
- Extracurricular Activities, Community involvement and recommendations
- How this scholarship educational award will help you, your family and this community.

DISBURSEMENT OF FUNDS: Awarded monies will be distributed as follows:

- First half of the Lo Bello Women's Association Scholarship Fund will be disbursed in the Fall of the awarded year to the college/university
- Second half of the Lo Bello Women's Association Scholarship Fund will be disbursed in the Spring of the awarded year based on:
- After completion of the Fall semester, awardees must submit an OFFICIAL transcript of their Fall grades which reflect at least a cumulative grade point of 3.0 or above on 4.0 grade scale or equivalent
- Student must provide a class schedule verifying full-time status of at least 12 hours for the Spring semester to receive the second disbursement of the Lo Bello Women's Association Scholarship.

DEFERMENTS: Applicants who submitted completed applications that were accepted and approved for award, but were not able to accept due to Military service, immediate family death, serious injury or sickness will be allowed to defer award up to 12 months. Documentation for deferment will be required.

A. APPLICANT'S PERSONAL INFORMATION:

Name: _____ Birth Date: _____
Address: _____ Phone: _____
City & State: _____ Zip Code: _____
Email address: _____ Cell Phone: _____
Social Security #: _____ U.S. Citizen: Yes ___ NO ___
Place of Birth: _____
Marital Status: _____ Number of Dependents: _____ Ages: _____

B. APPLICANT'S EDUCATIONAL DATA

High School Attended: _____ Year Graduated: _____
If not graduated, will you graduate this Spring? Yes _____ No _____
GED Graduate: Yes: _____ Year Tested: _____ Test Scores: _____
Other Training (Vocational, Technical and Clerical): _____

C. APPLICANT'S EMPLOYMENT DATA

Are you employed now? If yes, please list employer below:

Employer: _____ Wage _____ per _____
Employer: _____ Wage _____ per _____

Will you be living at your parent's home while attending college? If away from home, how will you pay for it? _____.

Will your family provide financial support to you while attending college? If no, how will you support yourself while attending college full-time? _____

D. ACTIVITIES DATA

Please list all Civic or Club Membership and School Activities, Include Community Services, Church, Boy or Girl Scouts, etc... Please attach a separate sheet if needed. _____

E. CHARACTER REFERENCES: List three (3) personal character references:

Name of Reference	Occupation	Phone Number	Relationship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

F. COLLEGE OR UNIVERSITY CHOICE:

List full name and address of college or university you will be attending or plan to attend:

Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Have you been accepted to the above institution? Yes _____ No _____

PLEASE ATTACH A COPY OF YOUR LETTER OF ACCEPTANCE

G. FINANCIAL AID: Please list all other grants or scholarships applied for:

Name of Organization	Requirements	Amount \$ Awarded
_____	_____	_____
_____	_____	_____
_____	_____	_____

H. FAMILY DATA

Dual Parent Same Household: Yes _____ No _____ Single Household: Yes _____ No _____

Number of family-dependent children: _____ Ages of family dependent children: _____

Father's Name: _____ Occupation: _____

Address: _____ Employer: _____ Phone: _____

Living at home: Yes _____ No _____

Mother's Full Name: _____ Occupation: _____

Address: _____ Employer: _____ Phone: _____

Living at home: Yes _____ No _____

List last three (3) combined Annual Incomes of both parents from 1040 Tax Returns:

This Year: _____ Last Year: _____ Previous Year: _____

Please attach completed and signed copies of 1040 Tax Returns

*****all information is held strictly confidential*****

I. TO BE FILLED OUT BY SCHOOL COUNSELOR ONLY

Check List:

Official High School Transcript Attached: Yes ____ No ____

Parent/Guardian 1040's Income Verification for the past three years: Yes ____ No ____

School Recommendations (Optional) _____

ACT Test: Date: _____ Location: _____ Score: _____

SAT Test: Date: _____ Location: _____ Score: _____

Please Complete:

High School Rank _____ of _____ Class Students

Six-Semester Grade Point Average: _____

High School Attendance: Absences _____ in _____ years.

List Participation in School Activities (Please attach a separate sheet if needed)

Signed: _____ Title: _____ Date: _____

VERIFICATION ENCLOSURES:

1. Official High School Transcript or copy of GED Test Scores with this application. If student is a graduating high school senior, an official letter or transcript from the school indicating your grade point average. Due to the academic requirements, applications must be ar high school graduate having graduated, or persons who have passed the GED equivalency with high-test scores. You may also include any letters of recommendation relevant to this scholarship application.
2. Copies of parent's Form 1040 tax returns and applicable attachments (W2's, social security verification, disability verification, etc...) for the last three (3) years to show proof of income.

Applications without verification are considered incomplete

And will be automatically disqualified !

3. A listing of all other scholarships and grants you have applied for, been awarded or will expect to receive toward your college education. List amounts of money and compensations provided.
 4. List all other government and private monetary assistance you have applied for, been awarded, or will receive toward your subsistence while attending college. If you applied for a Pell Grant, please include your Index Number. If you have already received it and/or the annual amount expected to be received.
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I certify that all of the information included in this application is true and complete. I further understand that this scholarship is for tuition and books only for the semester allocated and cannot be duplicated by additional scholarships and grants in which I am receiving. I authorize investigation of all statements contained in this application for a scholarship as may be necessary in arriving to an award decision. This application for a scholarship shall be considered active for a period of time not to exceed one (1) year.

I further authorize Lo Bello Women's Association to take my picture at the awards ceremony to use on the Lo Bello Women's Association Scholarship web page.

Applicant Signature

Date

Parent Signature

Date

Mail completed application and all required documents to the address below.

Lo Bello Women's Association

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San Antonio, Texas 78278-0163
