



LATINAS UNIDAS

LATINA WOMEN SCHOLARSHIP FUND  
A donor Advised Fund of the Women's Foundation of Genesee Valley

*Scholarship Application*

*Funded and Sponsored by Latinas Unidas, Inc.*

[www.latinasunidas.org](http://www.latinasunidas.org)

*Administered by The Women's Foundation of Genesee Valley*



The Women's Foundation of Genesee Valley  
277 Alexander Street, Suite 305  
Rochester, NY 14607



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Thank you for your interest in applying to the Latinas Unidas Scholarship. Latinas Unidas has been awarding this scholarship since 2002; helping Latinas begin or continue their educational or training pursuits. The mission of Latinas Unidas is *to foster opportunities that will promote unity, cultural identity and the presence of the Latina woman in the community, and to encourage and motivate women to be proud of themselves and to assume active and positive roles in society, and to perform such functions incidental to achieving these purposes.*

### Eligibility

- Be a resident of one of the seven-counties of Genesee Valley: Genesee, Livingston, Monroe, Ontario, Yates, Orleans and Wayne.
- Be a Latina at least 25 years old
- Be accepted and enrolled in a training or formal education program that leads to job and financial advancement
- Be a high school graduate or have obtained G.E.D.

### Application packet (Application will not be reviewed if any document is missing).

- Completed Latinas Unidas Scholarship Application.
- Application Checklist Form (enclosed)
- Copy of the Student Identification card from the institution the applicant is enrolled.
- Copy of High School Diploma/G.E.D, if in a training program (not needed for College program)
- Proof of acceptance (letter or schedule) to the program for which the scholarship funds will be used, if selected.
- Two (2) letters of recommendations from an employer or volunteer supervisor that can address your service to others and your commitment to your personal advancement. (Forms for the recommenders are included in this packet).

### Documentation, if selected

- If selected for the scholarship, you will have ten (10) days to provide the following:
  - Proof of enrollment for the term the scholarship will be applied to.
  - Bill from the respective institution

Mail applications to:  
Latinas Unidas Scholarship Committee  
PO BOX 64611  
Rochester, NY 14624

To submit applications online: [scholarship@latinasunidas.org](mailto:scholarship@latinasunidas.org)

**DEADLINE EXTENDED TO OCTOBER 21, 2016**



## Selection Process

The Latinas Unidas board has established a Scholarship Committee that will be overseeing and awarding the scholarship. This committee is comprised of Latinas who have experience and expertise in this area. These women are committed to the mission of Latinas Unidas—*supporting the Latina woman*.

Applications will be made available via the Latinas Unidas website at [www.latinasunidas.org](http://www.latinasunidas.org). Sharing the application with colleagues and friends is encouraged. Applications can be submitted via postal mail or online. The **deadline** to submit the application is **October 21, 2016**. Applications will NOT be accepted after this date.

The scholarship committee will review the applications and will notify winners by November 2, 2016. The winners will need to provide the following documentation **by November 10, 2016**:

1. Proof of enrollment for the term the scholarship will be applied
2. Bill from the respective institution

*Scholarship awards will be paid directly to the respective institution after the institution's census date.*

Scholarship winners will be recognized at the Latinas Unidas Reconocimiento and Scholarship Awards on Tuesday, November 3, 2016. Each winner will be provided with a complimentary ticket.

**\*\*Tentative schedule\*\***

Application Deadline -	October 21, 2016
Scholarship Committee Final Review -	Winners Notified
Winners Notified -	November 2, 2016
Winners provide additional documentation -	November 10, 2016
Checks mailed out -	After Census Date of Respective Institution
Reconocimiento and Scholarship Awards -	November 3, 2016



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### APPLICATION CHECKLIST (to be submitted with the scholarship application)

Applicant Name \_\_\_\_\_ Date \_\_\_\_\_

Training or Education Institution \_\_\_\_\_

Scholarship Packet (check if included)

- Application Checklist
- Complete Application
- Copy of Student Identification from respective from the institution the applicant is enrolled
- Copy of High School Diploma/G.E.D, (not needed if enrolled in College)
- Proof of acceptance (letter or schedule) to the program for which the scholarship funds will be used, if selected.
- Personal Essay
- Two (2) letters of references from an employer or volunteer supervisor

*Remember, the complete application is due by **October 21, 2016**. No applications will be accepted after this date.*

To mail applications:  
Latinas Unidas Scholarship Committee  
PO BOX 64611  
Rochester, NY 14624

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## SCHOLARSHIP APPLICATION

### SECTION I – PERSONAL INFORMATION

Full Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
(Number – Street)  
\_\_\_\_\_  
(City/Town/Village) (State) (Zip Code)

Best Phone Number to Reach You (\_\_\_\_\_) \_\_\_\_\_ Home \_\_\_\_ Cell \_\_\_\_ Work \_\_\_\_

Best Email Address to Contact You \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ High School Diploma or G.E.D Date \_\_\_\_\_

College/University/Training Institution \_\_\_\_\_

Total Number of Persons in your Household (Include yourself) \_\_\_\_\_

	<u>NAME</u>	<u>AGE</u>	<u>RELATIONSHIP</u>
1.	_____	_____	SELF
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____



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## SECTION II – FINANCIAL/EMPLOYMENT INFORMATION

1. Your source of financial support      Self \_\_\_\_\_      Other \_\_\_\_\_
2. Your annual income \_\_\_\_\_

### **Employment information for the past 10 years.**

1. Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Job Title \_\_\_\_\_ Employment Dates \_\_\_\_\_ To \_\_\_\_\_  
Job Description: \_\_\_\_\_  
\_\_\_\_\_

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2. Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Job Title \_\_\_\_\_ Employment Dates \_\_\_\_\_ To \_\_\_\_\_  
Job Description: \_\_\_\_\_  
\_\_\_\_\_

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3. Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Job Title \_\_\_\_\_ Employment Dates \_\_\_\_\_ To \_\_\_\_\_  
Job Description: \_\_\_\_\_ + \_\_\_\_\_  
\_\_\_\_\_



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## SECTION IV – COMMUNITY ACTIVITIES

Community activities in which you participate or have participated. Identify leadership positions.

Dates	Title	Responsibility
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## SECTION V – PROGRAM ENROLLMENT

Name of Institution You Are Enrolled \_\_\_\_\_

Institution Address \_\_\_\_\_

Institution Website \_\_\_\_\_

Your Student Identification Number \_\_\_\_\_

Program of Study \_\_\_\_\_ Type of Certificate/Degree \_\_\_\_\_

Expected Graduation Date/Term \_\_\_\_\_ Career Goal \_\_\_\_\_

Your plans upon completion of this program

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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## SECTION VI. PERSONAL ESSAY

The Scholarship Committee wants to know more about you. In an essay (minimum 250 words) share the following:

- Your enrollment at the institution, including your program of study and any experiences you have had so far.
- The circumstances or people who encouraged you to pursue this training or degree. Include experiences that have influenced you.
- Your career and personal goals. Include family goals and future aspirations.
- The reason(s) you should receive this scholarship. What barriers will this scholarship help you overcome?

## SECTION VII. REFERENCES – *Make sure to provide them with the recommendation forms provided.*

Name of Recommender #1 \_\_\_\_\_ Business/Organization \_\_\_\_\_

Name of Recommender #2 \_\_\_\_\_ Business/Organization \_\_\_\_\_

## SECTION VIII. CONCLUSION

1. How did you hear about our scholarship?

- Latinas Unidas Website
- Latinas Unidas Social Media – Facebook, Twitter, LinkedIn
- Latinas Unidas Event- What event? \_\_\_\_\_
- Latinas Unidas Email
- Website – Which one? \_\_\_\_\_
- A Friend/Colleague
- Other – please specify \_\_\_\_\_

My signature below indicates that I understand that I am submitting my complete application for the Latinas Unidas Scholarship. I assume complete responsibility for the accuracy of the information stated in this application. In no way do I assume that this is an indication of being awarded the scholarship. It is simply an application. I further understand that, if selected for the scholarship, I am fully responsible to provide the necessary documents in the time allotted to Latinas Unidas. Failure to do so can result in a denial of the scholarship.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

For questions regarding this scholarship application please email [scholarship@latinasunidas.org](mailto:scholarship@latinasunidas.org).





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## REFERENCE FORM

(make copies as needed)

The applicant named within, is applying for the Latinas Unidas Scholarship. This scholarship assists Latinas who are non-traditional college age who are pursuing post-secondary education or training as a means for personal advancement. You have been selected by this applicant as a person who can serve as a reference for her.

Applicant Name: \_\_\_\_\_

Name of Reference Writer: \_\_\_\_\_ Title \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_ Years working with applicant \_\_\_\_\_

Please rate the following statements:

	1-Very weak	2- Weak	3- Cannot rate	4-Strong	5-Very strong
	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
1. How would you rate the applicant's effectiveness working with others?					
2. How would you rate the applicant's leadership skills?					
3. How would you rate the applicant's commitment to serving others in a caring manner?					
4. How would you rate the applicant's commitment to achieving her personal goals?					
5. How would you rate the applicant's ability to complete fully complete tasks assigned to her?					
6. How confident are you in the applicant's ability to reach her goal?					
7. How confident are you in the applicant's ability to complete her program of study?					

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Mail to Latinas Unidas Scholarship Committee, PO BOX 64611, Rochester, NY 14624 OR scan and email to [scholarship@latinasunidas.org](mailto:scholarship@latinasunidas.org). The deadline is **October 21, 2016**.