



Hispanic Organization for Progress and Education Scholarship Application Form

DEADLINE DATE FOR APPLICATION: April.1

Academic year for which assistance is requested: 20____ through 20____

Eligibility

You are eligible for a HOPE (Hispanic Organization for Progress and Education) **Continuing Education Scholarship**, if you meet all the following:

- ☐ Are you a Laramie County Resident?
- ☐ Are you a current full-time student at Laramie County Community College?
- ☐ Are you a student of Hispanic descent?
- ☐ Do you have (at least) a 3.0 College GPA?
- ☐ Submit the application and provide a copy of your academic transcript.

Make sure you complete all the 3 pages in this application!

Section 1 - Personal Information (please type or print in black ink)

Name:

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Last First Middle

Address:

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Street City State Zip Code

Email:

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Primary Alternative

Telephone:

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Your Primary # (prefer Mobile #) Alternative # (parents or other)

Date of Birth:

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APPLICATION: LARAMIE COUNTY HISPANIC CONTINUING STUDENTS

Permanent
Mailing
Address:

Street	City	State	Zip Code

Names and addresses of parents, spouse, legal guardians, or others who provide financial contributions or plan to contribute to your academic support.

Are you currently residing with anyone mentioned above? ☐ Yes ☐ No

Section 2 – Employment

Are you currently employed? ☐ Yes ☐ No If yes, how long in present job?

Employer's Name

Employer's Address

Section 3 – Education

College or Technical School you plan to attend for which assistance is requested:

Planned Field of Study or Major:

Section 4 – Other Activities, Community Involvement, Volunteer Work

Section 5 – Personal Essay

1. Please complete a 1-2 page, double spaced, 12 pt. font, essay using this prompt:

Choose a Hispanic person you admire and why? How have they inspired you to achieve higher education and reach your goals?

2. Please complete a 1 page, double spaced, 12 pt. font, statement on how this scholarship will help you in your educational endeavors and how you intend to use the money

Section 6 - Agreement and Signature

By submitting this application:

- ☐ I affirm that the information submitted is true and complete.
- ☐ I am in need of this assistance to continue my education.
- ☐ I will use the proceeds of any assistance received for payment of my education expenses.
- ☐ I understand that this form is an application only and does not insure that assistance will be granted.

Name (printed)

Signature

Date

All qualified applicants will be contacted for a personal interview.

HOPE SCHOLARSHIP APPLICATION

(Keep this section for your records)

HOPE Scholarships are funded by donations to the HOPE Scholarship fund, as well as from the proceeds of any fundraisers. Therefore, the amount and number of awards will be limited to available funds and may vary from year-to-year.

Scholarship recipients will be expected to assist with the fundraising and other events throughout the year.

You will be asked to submit proof of college registration in order to receive your scholarship award. **Please submit proof of registration by August 1, 2024.**

Please report any changes/additions to the HOPE Scholarship Chair at this email:

wyo.hope.scholarship@gmail.com

Call HOPE at (307) 274-4425 if you have questions.

Completed applications are due no later than 5:00 p.m. on April 1, 2024

Submit Completed Application to:

HOPE Scholarship Committee P.O. Box 3194

Cheyenne, WY 82003

or to email: wyo.hope.scholarship@gmail.com

Check List:

- ☐ Have you completed the scholarship application? (Incomplete applications will be disqualified).
- ☐ Have you attached a copy of your College transcripts?
- ☐ Have you attached your personal essay?
- ☐ Have you signed the application form?