



1625 W. Olympic Blvd. Suite 718
Los Angeles, CA 90015
Tel (213) 480-1052
Fax (213) 487-2530
www.salef.org

Fulfilling Our Dreams

2009 Scholarship Application

“Fulfilling Our Dreams” Scholarship Fund

Since SALEF’s foundation in 1995 by a group of Salvadoran immigrants and activists, one of its prominent goals has been to provide educational assistance to Salvadoran, Central American, and other Latino students. We know that in order for our communities to fully realize their dream of economic prosperity and political empowerment, we need to help open the doors to higher education.

In keeping with this mission, SALEF established the *Fulfilling Our Dreams* Scholarship Fund, which awards scholarships to Salvadoran, Central American, and other Latino college students. Scholarships range from \$500 to \$5,000 and are awarded annually.

SALEF places emphasis on experience in community service for social change. Therefore, scholarship recipients are asked to give back to the society through joining a community project. Whether is becoming a mentor, tutor or joining a SALEF chapter each student is required to complete fifty two hours in one year. This is with the mere purpose to keep SALEF’s mission going forward and to guarantee that our Latino population keeps growing in a supportive environment.

We also partner with area colleges, universities, and government officials to promote the expansion of opportunities through informational fairs, application assistance and financial aid information. “Fulfilling Our Dreams” is just one of a series of programs which strives to fulfill our vision.



SALEF’s Mission is to promote the civic participation and representation of the Salvadoran and other Latino communities in the U.S., promote the economic development and democracy in El Salvador, as well as to advocate for its economic, educational, and political advancement and growth.

Eligibility Criteria

- ☞ Applicants must be of Central American or other Latino ethnicity.
- ☞ Applicants must demonstrate financial need.
- ☞ Applicants must possess a minimum 2.5 GPA.
- ☞ Applicants must demonstrate a history of community involvement.
- ☞ Applicants must be either: a) graduating High School seniors, b) current undergraduate, graduate and professional students or c) community college students*
 - *must be AB540
- ☞ Low income students must reside and study in the San Francisco Bay Area and Los Angeles Area (Specifically South Central Los Angeles, Pico Union, East Los Angeles) and San Fernando Valley.

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- ☞ **Applicants must be willing to give back to the community by becoming a mentor to a high school student or completing the equivalent of 52 community service hours assigned by SALEF.**

^SALEF Scholarship is a one-time award. Former SALEF scholars are ineligible.

^^ SALEF Scholarship is open to all qualifying students regardless of immigration status.

Terms and Conditions

- ☞ **The scholarship award will be exclusively used for tuition purposes.**
- ☞ **The scholarship award will be allocated directly to the school of attendance.**
- ☞ **The award will be disbursed in two installments upon verification of scholarship requirements (maintain a GPA of 3.0 and completion of assigned community project by SALEF).**

APPLICATION GUIDELINES: Please read the following before submitting your application.

- Send **all** supplementary documents with your completed application postmarked by **JUNE 30, 2009**
- Applications postmarked after the deadline **will not** be accepted.
- Faxed or emailed applications **will not** be accepted.
- Incomplete applications will not be reviewed. Applications missing any of the required documents are considered incomplete, unless SALEF's program manager has granted prior approval.
- Finalists will be notified of interviews via email and telephone during August 2009.
- Selected recipients will be notified in September 2009
- PLEASE NOTE: No regret letters will be sent.

Please mail or deliver **complete** application package to:

Salvadoran American Leadership and Educational Fund (SALEF)
“Fulfilling Our Dreams” Scholarship Fund
ATTN: SCHOLARSHIP FUND COORDINATOR
1625 W. Olympic Blvd., Suite 718 ~ Los Angeles, CA 90015

Questions? Please contact Karina Madrigal at (213) 480-1052 or via email at kmadrigal@salef.org

INCLUDE THE FOLLOWING WITH THE COMPLETE APPLICATION:

Letters of Recommendation

Each applicant must submit two letters of recommendation. Letters should be sent on official letterhead when applicable and should address the following:

- Recommender's relationship to the applicant including engagement of time acquainted and in what capacity.
- Applicant's goals/aspirations/strengths/weaknesses.
- Examples of applicant's community/educational/leadership involvement.
- Assessment of the applicant's overall potential to succeed in college.

Personal Statement

In a written statement of no more than 800 words, please describe the following:

- Your background, family history, upbringing experiences and obstacles confronted.
- Goals/aspirations/ambitions including short and long-term goals.
- Your community involvement, how you have contributed to your community and plan to after graduation.
- Why you chose your field of study.
- How do you ambition to get involved with SALEF in order to continue supporting students like you.

Résumé

Please include paid and unpaid experience, highlighting your volunteer and community involvement, as well as certificates, awards and special honors received, and a complete educational history.

Official Transcripts

Official transcripts must have school seal and/or authorized signature. Unofficial transcripts will not be accepted.

Copy of parents' and your own 2008 Federal Tax Return OR Proof of Family Income

(If not applicable, please include a written statement with explanation.)

Copy of your Federal Financial Aid Award (FAFSA) Letter

(If not applicable, please include a written statement with explanation.)

For Office Use Only: Gen Med UG Grad AB540	
Applicant Name: _____	_____
Applicant ID# _____	Date Rec'd: _____
Complete: Y _____	N _____

I. ACADEMIC INFORMATION:

Complete appropriate section. If not applicable write N/A

Select one:

- Graduating high school senior, complete section A**
- Transferring student, complete section B**
- Current undergraduate student, complete section C**
- Graduate, PhD, or professional student, complete section D**

A. GRADUATING HIGH SCHOOL SENIOR

Current High School: _____

GPA (4.0 scale weighted): _____
Graduation Date: _____

College you will be attending in Fall 2009:

Expected Academic Major(s):

B. TRANSFERRING STUDENT:

Current College/University: _____

Transferring School: _____

Class Standing: _____

GPA: _____

Expected Graduation Date: _____

Academic Major(s)/Minor(s):

High School Attended/Graduation Date:

C. CURRENT UNDERGRADUATE STUDENTS

Current College/University: _____

Major(s)/Minor(s):

Class Standing: _____

Expected Graduation Date: _____

GPA: _____

High School Attended/Graduation Date

D. (Select one) CURRENT GRADUATE, PhD or PROFESSIONAL STUDENTS

Current College/University: _____

Academic Program:

Class Standing: _____

GPA _____

Expected Graduation Date: _____

Undergraduate Degree:

Undergraduate School:

Undergraduate GPA: _____

NOTE: Applicants must be enrolled full time, at the time of selection, with an accredited institution of higher learning for the 2009-2010 school year.

For Office Use Only: Gen Med UG Grad AB540	
Applicant Name: _____	
Applicant ID# _____	Date Rec'd: _____
Complete: Y	N

III. FINANCIAL INFORMATION Complete all sections

1. (a) Annual Family Income: _____ (b) Personal Savings _____
 2. (a) Are you a dependent? Yes No (b) If no, do you have dependents? Yes No
 (c) Number of dependents? _____
 3. Number of family members attending college (include yourself): _____

4. Did you apply for financial aid through FAFSA? Yes No, if no explain: _____
 5. Have you received scholarships for this academic year? Yes No
 If yes, please list organizations providing scholarships and amounts awarded?

Please provide an estimate of the following for the 2008-09 academic year. (Recipients will be required to provide proof)

<i>Estimated School Expenses</i>		<i>Estimated Income</i>	
Tuition & Fees	\$ _____	Scholarships & Grants	\$ _____
Books & Supplies	\$ _____	Loans	\$ _____
Room & Board	\$ _____	Parent Contribution	\$ _____
Other (please list)	_____	Employment	\$ _____
_____	\$ _____	Other _____	\$ _____
_____	\$ _____		
_____	\$ _____		
TOTAL	\$ _____	TOTAL	\$ _____

IV. APPLICATION CERTIFICATION *If under 18 years of age, parent signature required:*

I hereby certify that the information provided in this application is accurate and complete to the best of my knowledge. I authorize SALEF to verify any information submitted as part of this application. I understand that any falsifications will result in the disqualification of my application.

I understand that any changes in school and/or enrollment status must be reported to SALEF, failure to comply may lead to disqualification of my scholarship award if selected as a recipient.

I give SALEF permission to release my name, institution, essay, and photograph for promotional purposes, if selected to receive the Fulfilling Our Dreams Scholarship recipient.

Printed Name: _____

Signature: _____ Date: _____

Parent Printed Name: _____

Parent Signature _____ Date: _____

For Office Use Only: Gen Med UG Grad AB540	
Applicant Name: _____	
Applicant ID# _____	Date Rec'd: _____
Complete: Y	N

RELEASE AUTHORIZATION FORM

Date: _____

TO:

Salvadoran American Leadership and Educational Fund
"Fulfilling Our Dreams" Scholarship Program
1625 W. Olympic Blvd, Suite 718
Los Angeles, CA 90015

FROM:

Name: _____

Address: _____

AFFIX A COLOR PHOTOGRAPH HERE.

PHOTOGRAPH SPECIFICATIONS

- PHOTOGRAPGH **no larger than** 3 ½ X 5 in.
- DO NOT INCLUDE GROUP PICTURES.
- HEAD SHOTS ONLY.

I, the undersigned, authorize the Salvadoran American Leadership and Educational Fund to reprint my personal statement and/or photograph for all rights, including but not limited to advertising/marketing, reports, newsletters and other publications.

I understand that my personal statement may be edited for grammar, clarity and/or suitability, as deemed necessary.

I understand that my personal statement and/or photograph may or may not be used and that my photograph will not be returned.

Printed Name: _____ Date: _____

Signature: _____ Date: _____