ALAMO COLLEGES

SAN ANTONIO COLLEGE
Services for Women and Non-Traditional Students
Women's Center • Seguir Adelante • MI CASA Program

2013-2014 Tom Sandoval Rey Feo
LULAC PARENT/CHILD SCHOLARSHIP PROGRAM

FACTS

The **Tom Sandoval Rey Feo LULAC Parent/Child Scholarship Program** seeks to ensure the **educational success of two generations**. Honored in 2007 with the prestigious STAR Award by the Texas Higher Education Coordinating Board, and selected as a finalist in the 2008 Excelencia in Education Award, the program provides support, assistance and incentives for PARENTS to successfully complete their educational objectives at an Alamo College. The parent earns a TWO YEAR SCHOLARSHIP for their CHILD to attend an Alamo College upon high school graduation when the parent completes their stated educational objective.

BENEFITS

- The **parent** receives **$250 per semester** for four consecutive semesters (fall and spring only) if enrolled at an Alamo College.
- The **child** is eligible to claim a **two year tuition and fee scholarship** to attend any Alamo College after their high school graduation, when the parent completes an educational goal: certificate, associate degree or university transfer.

REQUIREMENTS

- Be the parent of a CHILD, age six or younger (*only one child eligible per family*).
- Commit to completing an educational goal at an Alamo College- certificate, associate degree or transfer program- within four years of selection for the scholarship.
- Have no more than 30 college level earned hours *(remedial courses do not count against this calculation*).
- A minimum 2.0 cumulative GPA at time of application and meet Alamo Colleges Satisfactory Academic Progress (SAP).
- Complete Free Application for Federal Student Aid (FAFSA) already submitted to an Alamo College.
- Enroll in Fall 2013 at one of the Alamo Colleges: Northeast Lakeview College, Northwest Vista College, Palo Alto College, San Antonio College or St. Philip's College.
- Interview with the LULAC Parent/Child scholarship committee, if considered for the scholarship.

APPLICATION SUBMISSION

Submit your COMPLETE scholarship application form, the required essay, letter of recommendation and release form by MAIL, EMAIL or HAND DELIVER:

By mail: **PARENT/CHILD SCHOLARSHIP PROGRAM**
San Antonio College Women's Center
1300 San Pedro
San Antonio, TX 78212

Fax: **210-486-9266** OR Email: Bertha Castellanos **bcastellanos6@alamo.edu**

Hand deliver: **SAC Empowerment Center, 703 Howard San Antonio, TX 78212**

DEADLINE: October 28th, 2013 for Fall Semester Award

Contact us for questions or more information: **210-486-0458 or 210-486-0455**
http://www.alamo.edu/sac/SWANS/

2013-2014 Tom Sandoval Rey Feo
LULAC PARENT/CHILD SCHOLARSHIP PROGRAM

APPLICATION

I. *Please print or type and complete all sections.*

Student's Name: _____Banner or SSN: _____

Address: _____ City: _____State:_____ Zip: _____

Home Phone: _____ Cell Phone: _____ Email:_____

Female _____ Male _____ High School Graduate _____ or GED Graduate _____

Most recent school attended: _____ Earned College Hrs: _____ GPA : _____

(*If attending high school, provide official transcript)*

Has anyone in your family graduated from college? _____ yes _____ no

If yes, who? _____

Your Child's name:_____ Female _____ Male _____

Child's SSN: _____ Child's Birth date (day, month, year): _____

Emergency contact: _____ Relationship: _____ Phone: _____

II. To be completed before applying*:*

- Enrollment for the Fall 2013 semester at an Alamo College.
- A Free Application for Federal Student Aid (FAFSA) form **

*** MUST be complete and submitted to an Alamo College, prior to applying*

Alamo College attending or planning to attend in Fall 2013:

- Northeast Lakeview College
- Northwest Vista College
- Palo Alto College
- San Antonio College
- St. Philip's College

Your educational goal is:

_____ Certificate

_____ Associate of Arts

_____ Associate of Science

_____ Associate of Applied Science

_____ Transfer to a University

III. On a separate sheet of paper, TYPE a minimum one-page ESSAY addressing the following:

A) Tell us about your professional aspirations and career goals

B) What are some of your current personal challenges?

C) How will this scholarship help you and your child?

IV. *Recommendation letter*

A **counselor, instructor, employer or supervisor** should complete and sign the attached recommendation form. Recommendations from relatives or friends will not be considered.

V. Application checklist:

Complete application form

- Official high school transcript (*only for students currently attending high school*)
- College transcript *(only required if transferring from outside the Alamo Colleges)*
- FAFSA completed and submitted
- Essay
- Recommendation letter
- Release form and copy of Student ID or Driver's license *(attached, allowing permission for the scholarship committee to review the application).*

***DEADLINE*: October 28th, 2013 for Fall Semester Award**

The information submitted on this application is true to the best of my knowledge. I understand that any false information given may disqualify me from consideration for and participation in this program.

_____ _____

Applicant's Signature Date

Mail complete application to:

PARENT/CHILD SCHOLARSHIP PROGRAM
San Antonio College Women's Center
1300 San Pedro
San Antonio, TX 78212

Email: Bertha Castellanos, **bcastellanos6@alamo.edu**

Hand deliver: SAC Empowerment Center, 703 Howard, San Antonio, TX 78212

QUESTIONS?
Phone: (210) 486-0458 or 486-0455

http://www.alamo.edu/sac/SWANS/

FOR OFFICE USE ONLY

Comments _____

Complete application Y/N?_____ Recommender: _____

Received by:_____Date:_____

ALAMO COLLEGES

SAN ANTONIO COLLEGE
Services for Women and Non-Traditional Students
Women's Center • Seguir Adelante • MI CASA Program

PARENT/CHILD SCHOLARSHIP PROGRAM
RECOMMENDATION FORM

STUDENT'S NAME: _____

The person named above is applying for our scholarship program. This evaluation is a critical component in our selection process and we appreciate your reply. Please feel free to attach an additional page, if needed. Thank you!

1) In your perception, how motivated is this student to pursue a college education?

_____

_____

2) Based on your experience, will this student commit to completing an educational goal? Explain.

_____

_____

3) In your opinion, has this student demonstrated determination and leadership?

_____

_____

4) What do you consider this student's strongest academic attributes?

_____

_____

5) Are there any additional comments you would like to make about this student?

_____

_____

_____

_____

Recommender's name and title: _____

College or Institution affiliated with: _____

College or Institution's address: _____

Phone: _____ Email: _____

How long have you known this student? _____ In what capacity? _____

Recommender's Signature_____

Note: *The student is responsible for submitting this letter with a complete application* packet.

FOR QUESTIONS OR MORE INFORMATION CONTACT US:
San Antonio College Women's Center
Parent/Child Scholarship Program
Attn: Bertha Castellanos: **bcastellanos6@alamo.edu**
Phone: 210-486-0458 or 486-0455 **Fax:** 210-486-9266
http://www.alamo.edu/sac/SWANS/

This program is sponsored by the San Antonio College Women's Center, Services for Women and Non-Traditional Students, in conjunction with LULAC Council # 2 and the Alamo Colleges Foundation.

ALAMO COLLEGES

SAN ANTONIO COLLEGE
Services for Women and Non-Traditional Students

CONSENT TO RELEASE
FERPA-PROTECTED STUDENT INFORMATION FORM

I, _____hereby consent to:
Printed Student/Client Name

Please check the information to be released under this consent:

A._____ Allow the individual(s) listed below to sit in while receiving services with my academic counselor.

_____ _____
Printed Name Relationship to Student/Client

B.__X__ Authorize person(s), organization, or establishment having information or records concerning me or my circumstances to provide such information to a representative within the Department of Services for Women & Non-Traditional Students. I also grant permission for the Department to provide information which may have a bearing on my eligibility, program participation, and support services. This *Release of Information* is valid for the duration of my program participation and the follow up period of one year unless otherwise specified via written notification.

C._____The use of my name, relevant personal information, as well as my image (video or photographs) for the purposes of publicizing the Alamo Colleges and its representatives from any further claims or demands from the use of these materials.

D.__X___ Give permission to contact and or disclose information to my case manager(s), counselor, relative, or other support individuals(s) listed below regarding the services received or will receive at the Department of Services for Women & Non-Traditional Students.

Lulac Scholarship Committee_____
Printed Name of Support Person Relationship Phone

I understand that I may revoke this consent in writing at any time.

_____ _____
Student/Client Name (Print) **Student ID. No.**

_____ _____
Signature **Date**

( )_____ **( )**_____
Home Phone **Cell Phone**

** A photocopy of signing party's current, valid picture ID must accompany this form.

This release form was initiated by:

_____ _____
Printed Counselor Name & Initials *Date*

1300 San Pedro, San Antonio, Texas 78212 Phone: 210-486-0455