"The Foundation improves the quality of life in La Mirada by supporting services and programs meeting the needs of the community"

13700 La Mirada Boulevard, La Mirada, California 90638 (562) 943-0131

Bob Jenkins Community Scholarship Application Due Thursday, April 14, 2022

The La Mirada Community Foundation is seeking scholarship applications for graduating high school seniors residing in La Mirada. The scholarships vary in amount, and are intended to provide financial assistance to students planning to attend a university, college, or community college.

Applicants are responsible to write an essay (approximately 500 words or more) reflecting on the value of community services and discussing their personal involvement in community service work as well as the impact this has had on you and your community.

Students must reside in the City of La Mirada and submit residency proof (utility bill, etc.).

Please complete this application and submit it along with the required Personal Statement to the La Mirada Community Foundation for consideration by the deadline of April 14, 2022. <u>All required documents must reach the La Mirada Community Foundation Scholarship Committee no later than April 14, 2022.</u> You may submit by mail at:

Mail to: La Mirada Community Foundation

Attn: Scholarship Committee 13700 La Mirada Boulevard

La Mirada, CA 90638

SECTION 1 – APPLICANT INFORMATION

Contact Information				
Last name:	First name:			
Address:				
E-mail address:		_		
Primary phone:				
Secondary phone:				
High School(s)				
Name & Location of Institution		Date From	Date To	
Employment Experience (List	,			
Employer	Title or Type of Work	Date From	Date To	
Volunteer Service (List most r	ecent first)			
Organization	Title or Type of Service	Date From	Date To	
Leadership Experience (List n	nost recent first)			
Organization	Office or Position	Date From	Date To	
Organization	Office of Position	Date Hom	Date 10	

Proposed Institutions of Higher Education

	Name of institution 1
	Major Course of Study
	Location
	Have you received a decision on your application?
	Name of institution 2:
	Major Course of Study
	Location
	Have you received a decision on your application?
SECTI	ON 2 – REQUIRED DOCUMENTS – Please check for each item.
1	. COMPLETED APPLICATION FORM
2	 PERSONAL ESSAY: Attach to this application an essay of one to two typed pages stating how this scholarship will help you advance your career goals and benefit the community at large. (See sample essay in packet)
3	. SIGNED APPLICANT'S AGREEMENT: Form attached.
4	. SUBMIT PROOF OF LA MIRADA RESIDENCY (Utility bill).
	. TWO (2) RECOMMENDATIONS: Submit attached letters of recommendation from ers, counselors, or employment supervisor with your application.
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RECOMMENDATION

Name of Applicant						
PART II — To be completed by an academic instructor or employer/supervisor.						
1.	In what capacity and how lo	ong have you know	wn the applicant?			
			••			
2.	How firm is the applicant's	commitment to th	eir proposed field o	of study?		
3.	How would you rate the app	olicant in the follo	wing areas? If you	are unable to eval	luate an area, please lea	ve it blank.
	J 11	Excellent	Very Good	Average	Below Average	7
	Leadership		1 2 2 2 2 2 2 2 2			
	Initiative					7
	Seriousness of purpose					
	Enthusiasm					
	Adaptability					
	Maturity					
	Emotional stability					
	Public speaking					_
	Community service					_
1	Please cite specific example	s of how the appl	icent has demonstra	ated the qualities	listed in question 3	
4.	riease che specific example	s of flow the appl	icani nas demonsua	ned the qualities	nsted in question 5.	
5.	5. Additional comments:					
Name				Title or Po	osition	
Signat	Signature Date:					
Please return completed evaluation to the applicant or by mail before April 14, 2022 to:						
La Mirada Community Foundation						
Atte	Attention: Scholarship Committee					

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Name of Applicant						
PART II — To be completed by an academic instructor or employer/supervisor.						
1.	In what capacity and how lo	ng have you knov	wn the applicant?			
	1 3	<u> </u>				
2.	How firm is the applicant's	commitment to th	eir proposed field o	of study?		
3.	How would you rate the app					∕e it blank. ¬
		Excellent	Very Good	Average	Below Average	_
	Leadership					_
	Initiative					_
	Seriousness of purpose					_
	Enthusiasm					_
	Adaptability					_
	Maturity					_
	Emotional stability					4
	Public speaking					_
	Community service					
4.	4. Please cite specific examples of how the applicant has demonstrated the qualities listed in question 3.					
5.	Additional comments:					
Name				Title or Po	osition	
Signature Date:						
Please return completed evaluation to the applicant or by mail before April 14, 2022 to:						
La Mirada Community Foundation						
Attention: Scholarship Committee						

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I hereby apply for a La Mirada Community Foundation Scholarship:

If I receive a scholarship, I agree:

- 1. To permit La Mirada Community Foundation to use my name and all photographs and written reports generated through any of my activities related to my scholarship.
- 2. That I am responsible for gaining admission at my assigned study institution. I must abide by any decisions made by La Mirada Community Foundation officials concerning my scholarship.
- That I am expected to embrace La Mirada Community Foundation's spirit of volunteerism and engage in volunteer activities from the time of scholarship application, through the educational term, to a post-award commitment in my local community.
- 4. That my scholarship will not necessarily enable me to earn a degree, diploma, or certificate.
- 5. That the scholarship funding is for only those items required for my studies (such as tuition and other required fees, books, academic supplies, travel to my study location at the commencement and end of my scholarship year, accommodation and food.) I further understand that I will need to seek alternate sources of funding if my costs exceed this amount.
- 6. That La Mirada Community Foundation is in no way liable for a scholar's personal welfare or responsible for enabling a scholar to pursue his or her studies beyond the scholarship period. The La Mirada Community Foundation assumes no responsibility or obligation whatsoever beyond providing the amount of the scholarship.
- 7. All applicants agree that decisions of the La Mirada Community Foundation Scholarship Committee are final. To receive the award, recipients agree to authorize release of scholarship application materials and photograph for use by the La Mirada Community Foundation program promotion and publicity. Applicants agree to release, discharge and hold harmless La Mirada Community Foundation and their respective subsidiaries, affiliates, officers, directors and employees, from any and all claims or damages arising out of, in any way, their participation in the program. La Mirada Community Foundation reserves the right to review the conditions and procedures of this scholarship program and to make changes at any time including termination of the program. Questions about the application process may be directed to the La Mirada Community Foundation Committee at (562) 943-0131.

Name of Applicant (please print)	
Applicant's Signature	Date
Parent or Guardian Signature for Applicant <18 years	Print Parent or Guardian Name