



**Form 1**

**Culver City Community Scholarship**

**Applicant Questionnaire**

NAME: \_\_\_\_\_ Male  Female   
*Please print*      Last Name                      First Name                      Middle Initial

**There are many different scholarships awarded under the Community Scholarship Program. Certain community groups and individuals specify that they want to award their Community Scholarship to an applicant who has certain qualifications. Please complete every question with all the necessary information.**

First generation to go to college: YES  NO

1. College you plan to attend: \_\_\_\_\_  
2. List schools to which you have applied for admission:

\_\_\_\_\_  
\_\_\_\_\_

3. Intended major in college: \_\_\_\_\_  
4. Career for which you are planning to prepare:

Why did you make this choice?  
\_\_\_\_\_  
\_\_\_\_\_

5. Do you have any interest in? Animals  Music  Art  Graphic art  Computer  Computer graphics   
Computer animation  Ecology  Business/Marketing  Foreign language, foreign affairs  Anthropology   
Biology  Humanities  Social Science  Public Administration  Political Science  Government field

Please explain: \_\_\_\_\_

6. Have you participated in high school AVPA (Academy of Visual Performing Arts) program? **If YES**, name activity and year(s) participated \_\_\_\_\_

7. Have you participated in high school Robotics, Sports Medicine, Mock Trial, or in a Debate Team?  
**If YES**, name activity and year(s) participated: \_\_\_\_\_

8. Are you an African American Female? YES  NO

9. Did you attend a Culver City Unified School District elementary school? YES  NO   
**If YES**, name of school: \_\_\_\_\_

10. Did you attend the Culver City Middle School? YES  NO  **If YES**, number of years: \_\_\_\_\_

11. Have you studied a foreign language? YES  NO  **If YES**, name the language and the highest level completed as well as participation, if any, in any foreign language club or AP Foreign Language class: \_\_\_\_\_

12. Are either of your parents employed in a **classified** position by the Culver City Unified School District?  
YES  No  **If YES**, name of parent, school or place working, and job title: \_\_\_\_\_

13. Have you done any volunteer work with:  
• **Culver City Parks & Recreation** YES  NO  # of volunteer hours \_\_\_\_\_  
Name of activity \_\_\_\_\_

- **Political parties** (meeting, rallies, mailings for candidates) YES  NO  # of volunteer hours \_\_\_\_\_  
Name of activity \_\_\_\_\_
  - **Activities with children** YES  NO  # of volunteer hours \_\_\_\_\_  
Name of activity \_\_\_\_\_
  - **Fields of science** YES  NO  # of volunteer hours \_\_\_\_\_  
Name of activity \_\_\_\_\_
14. Have you been on a high school athletic team? YES  NO  If **YES**, name of athletic team: \_\_\_\_\_  
Number of years participated: \_\_\_\_\_  
On a Varsity team? If **Yes**, name of athletic team: \_\_\_\_\_
15. Was either of your parents a member of a U.S. military branch? YES  NO   
If **YES**, specify name of parent, branch of military and year of service: \_\_\_\_\_
16. Did you meet your graduation requirement of **60** service learning hours? YES  NO   
If **No**, how many more hours do you need to meet your graduation requirement: \_\_\_\_\_
17. List the Community Service activities you did to satisfy the **graduation requirements of 60 hours**:
- |                 |             |
|-----------------|-------------|
| Activity: _____ | Hours _____ |
| Activity: _____ | Hours _____ |
| Activity: _____ | Hours _____ |
18. List **other** (beyond 60 hrs of graduation requirement) volunteer Community Service activities:
- |                 |             |
|-----------------|-------------|
| Activity: _____ | Hours _____ |
| Activity: _____ | Hours _____ |
| Activity: _____ | Hours _____ |
19. List **major high school** activities in which you have participated:
- |                 |   |
|-----------------|---|
| Activity: _____ | Hours and/or Years: _____ Hrs _____ Years |
| Activity: _____ | Hours and/or Years: _____ Hrs _____ Years |
| Activity: _____ | Hours and/or Years: _____ Hrs _____ Years |
20. List any **community** activities (other than high school) in which you have participated:
- |                 |   |
|-----------------|---|
| Activity: _____ | Hours and/or Years: _____ Hrs _____ Years |
| Activity: _____ | Hours and/or Years: _____ Hrs _____ Years |
| Activity: _____ | Hours and/or Years: _____ Hrs _____ Years |
21. During the last two years, have you been employed for pay? YES  NO   
If **YES**, did you work—after school  weekends  summer

Name of Employer: _____	Job Responsibilities: _____
_____	_____
_____	_____

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

(To be completed by representative of Scholarship Committee)

Applicant's Grade Point Average: \_\_\_\_\_ Rank in Class \_\_\_\_\_/\_\_\_\_\_

**Form 2**

**Applicant Essay Questions**

Applicant's name:

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Last Name                      First Name                      Middle Name

**PLEASE COMPLETE 2 ESSAY QUESTIONS**  
**(each question in 200 words or less)**

**WRITE CLEARLY ON THIS PAGE OR ON ANOTHER SHEET**

1. Write an essay about some item you possess that holds great meaning for you. Describe the item and explain why it is of value to you.
2. What is the hardest thing you have ever had to do and how did it change you?

Parent(s)/Guardian(s) Questionnaire

To be completed by parent(s)/guardian(s) – NOT BY STUDENT

THIS INFORMATION REMAINS CONFIDENTIAL

Applicant's name: Last Name First Name Middle Name

Household

With whom does applicant make their permanent home? Mother \_\_\_ Father \_\_\_ Both \_\_\_ Legal guardian(s) \_\_\_ Other relation \_\_\_

Parent 1:

- ☐Mother ☐Father ☐Legal guardian(s) ☐No contact

Parent 2:

- ☐Mother ☐Father ☐Legal guardian(s) ☐No contact

Name \_\_\_ Age \_\_\_

Name \_\_\_ Age \_\_\_

Name & Address of Employer or Firm:

Name & Address of Employer or Firm:

Nature of Business: \_\_\_

Nature of Business: \_\_\_

Position Held: \_\_\_

Position Held: \_\_\_

- ☐Retired ☐Disabled ☐Divorced

- ☐Retired ☐Disabled ☐Divorced

- ☐Unemployed ☐Deceased

- ☐Unemployed ☐Deceased

The gross income reported last year on my Federal Tax return was between—

Check one:

- \_\_\_ Under \$10,000 \_\_\_ \$40,000–\$50,000 \_\_\_ \$80,000–\$90,000 \_\_\_ \$10,000–\$20,000 \_\_\_ \$50,000–\$60,000 \_\_\_ \$90,000–\$100,000 \_\_\_ \$20,000–\$30,000 \_\_\_ \$60,000–\$70,000 \_\_\_ Over \$100,000 \_\_\_ \$30,000–\$40,000 \_\_\_ \$70,000–\$80,000

What will be the family's estimated income for the current year? \_\_\_

Siblings

List all dependent children: List student applicant first

Table with 3 columns: Name, Age, Name of present school, college/occupation

**Form 3 – page 2**

List here **other** dependent(s) receiving financial support from family:

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Applicant will be attending:

Community college in CA  Out-of-state community college

4-year public college in CA  Out-of-state 4-year college

Private college in CA

Vocational trade school in CA  Out-of-state vocational trade school

What is the estimated annual budget necessary for the college and or training of the applicant?

\$ \_\_\_\_\_

Amount **applicant** can contribute to this cost annually: \$ \_\_\_\_\_

Amount **you as parent(s)/guardian(s)** can contribute to this cost annually: \$ \_\_\_\_\_

Are there any unusual family circumstances that might help evaluate this applicant's need for scholarship assistance?

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_  
**Print** Last First

Parent/Guardian: \_\_\_\_\_  
Signature

Address: \_\_\_\_\_  
Number and Street City Zip Code

(H) Phone#: \_\_\_\_\_ Cell #: \_\_\_\_\_ (W) Phone # \_\_\_\_\_  
Area Code and # Area Code and # Area Code and #

**Form 3a.**

**Media Release Agreement**

I agree to allow the use of my son's or daughter's name, photograph, video or still to appear on the Culver City Community Scholarship website or on the Culver City Unified School District website. For example, photographs and articles about the scholarship program and/or the scholarships awarded may appear in local newspapers or Culver City Unified School District publications. The photographs and articles may or may not personally identify the student. The photographs and/or videos may be used by the Culver City Community Scholarship Fund in subsequent years. I waive all claims against the Culver City Community Scholarship Fund, its Board and officers to indemnify and hold harmless the Culver City Community Scholarship Fund et al. from any and all liability, claims, demands, causes of action or judgments due to the use of the applicant's name and photograph.

- I agree to allow the use of my son's or daughter's name, photograph, video or still as stated in the Media Release Agreement.
  
- I do not** agree to the use of my son's or daughter's name, photograph, video or still as stated in the Media Release Agreement.

Applicant printed name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**For those 18 years of age and older**—I am at least 18 years of age and I have carefully read this document. I warrant that I understand and content the foregoing authorization, release and indemnity. My signature, heron, is my own free act and it is my intention to be legally bound hereby.

- By my signature below, I agree to the use of my name, photograph, video or still as stated in the Media Release Agreement.
  
- By my signature below, **I do not agree** to the use of my name, photograph, video or still as stated in the Media Release Agreement.

Applicant printed name: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE: The applicant completes the top three lines. It is the student's responsibility to make sure that the recommendation letter is included when turning in his/her application.**

School Employee's name: \_\_\_\_\_

Applicant's name: \_\_\_\_\_  
*Please print*                      Last Name                      First Name                      Middle Name

College the applicant plans to attend: \_\_\_\_\_

\_\_\_\_\_

How long have you known this applicant and in what context?

**YOUR RECOMMENDATION IS IMPORTANT TO THOSE MAKING THE SELECTION OF SCHOLARSHIP RECIPIENTS**

When writing the required typed letters of recommendation for a student, please provide your assessment of the applicant's achievements and potential for success.

While there are no required topics for a letter of recommendation, the Scholarship Committee has compiled the following commonly addressed points:

- The student's performance in your class.
- The student's academic or career goals and your impression of her/his ability to accomplish these goals.
- Any obstacle that the student has overcome.
- Observation of leadership skills.
- Observation of contribution to the school and/or community.

**PLEASE PAPER CLIP A LETTER OF RECOMMENDATION TO THIS FORM AND RETURN TO STUDENT.**

PLEASE PRINT YOUR NAME: \_\_\_\_\_

SUBJECT TAUGHT OR EMPLOYEE TITLE/DEPT.: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_



**NOTE: The applicant completes the top three lines. It is the student's responsibility to make sure that the recommendation letter and the scholarship application is completed and received by the deadline.**

Teacher's name: \_\_\_\_\_

Applicant's name: \_\_\_\_\_  
*Please print*                      Last Name                      First Name                      Middle Name

College the applicant plans to attend: \_\_\_\_\_

How long have you known this applicant and in what context?

**YOUR RECOMMENDATION IS IMPORTANT TO THOSE MAKING THE SELECTION OF SCHOLARSHIP RECIPIENTS**

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PLEASE PRINT YOUR NAME: \_\_\_\_\_

SUBJECT TAUGHT: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_