2016/2017 Academic Year Application Information

General Information

The Abrego Future Scholars Program at California State University, Fullerton (CSUF) was established to increase college participation, retention, and graduation of first generation and historically underrepresented students. The program is designed to support incoming first time freshmen and first-year transfer students for the academic year.

Recipients are awarded up to \$1,500. As part of the scholarship experience, students benefit from personalized support services to help facilitate their student success at CSUF. Recipients must complete a set of requirements as part of the scholarship program which include but are not limited to the following:

- Attend Fall and Spring scholarship orientation, events, and meetings;
- Meet for academic advising/coaching each semester;
- Meet with faculty/staff mentors;
- Meet with assigned peer mentor twice a month; and
- Attend student success workshops.

Eligibility Requirements

Scholarship recipients must meet these requirements:

- Be a first-time freshmen/first-time transfer students who meets regular CSUF admission requirements as a new CSU freshman or transfer student in Fall 2016.
- Scholarship is open to anyone regardless of residency status.
- Be a first generation college student.
- Demonstrate significant contributions to school and community activities.

Application Procedure

Application

☐ Completed application form, which should include personal experiences with employment and community service, honors and awards received, and one essay.

Recommender Form

One recommendation form required (can be submitted directly to program by recommender)

Transcripts

- ☐ Submit an unofficial copy of your transcript(s):
 - **First Time Freshmen:** Recent unofficial high school transcript.
 - **Transfer Students:** Unofficial transcripts from all colleges attended.

Test Scores (only for First Time Freshmen)

☐ **First Time Freshmen**: SAT or ACT scores. If these scores are not included on your official or unofficial high school transcript, include a copy of the test score report.

Financial Need Verification

☐ Submit a copy of your financial aid application Student Aid Report (SAR). You can get a SAR online, FAFSA applicants www.fafsa.ed.gov, CA Dream Act applicants www.dream.csac.ca.gov.

2016/2017 Academic Year Application Information Continued

Submission

The Abrego Future Scholars application packet should be submitted to the address below and postmarked on or before **April 15, 2016** (*Late and/or incomplete applications will NOT be accepted*).

By Mail: Center for Scholars – Abrego Future Scholars, California State University, Fullerton P O Box 6810, Fullerton, California 92834-6810 **In Person:** The application may also be handdelivered to our office located in the Center for Scholars, Pollak Library South 194 (PLS-194)

By Fax: Applications can be faxed to (657) 278-1509

By Email: The application can be emailed to jehamilton@fullerton.edu

Information

Helpful hints for the completion of the scholarship application:

- Responses should be neat and complete, grammar and spelling should be checked for accuracy.
- The completed application should clearly describe your economic, educational and environmental background, as well as your achievements and future goals.

Contact information

The Abrego Future Scholars Program is part of the Center for Scholars which provides students with space to study, a computer lab, free printing, community events, and leadership development opportunities.

If you have questions about the Abrego Future Scholars Program you can contact:

Jaime E. Hamilton Coordinator, Center for Scholars Abrego Future Scholars & President's Scholars T (657) 278-2389 | E jehamilton@fullerton.edu http://www.fullerton.edu/futurescholars/



Current Abrego Future Scholars, peer mentors, program staff, and mentors at a Spring 2016 event.



Abrego Future Scholars Program 2016/2017 Academic Year Application

Pages 3-4 to be completed student applicant (Instructions: Type or complete in dark ink only)

| Personal Information: | | | | |
|--|-----------------|----------------|--------------------------|--|
| Last Name | First Name | | | |
| Birth Date | | | | |
| Permanent Address | | | | |
| City | State | 9 | Zip | |
| Preferred Phone Number | | | | |
| 1. Will you be a First Time Freshman Student at CSUF? | Yes | | | |
| 2. Will you be a New Transfer Student to CSUF? | Yes | No | | |
| 3. Have either of your parents attended college? | Yes | No | | |
| 4. If you answered yes to question 3, please explain: | | | | |
| 5. What is your Expected Major? | | | | |
| 6. Name of College(s) Attended | | | | |
| City State Zip | | | | |
| Biographical & Educational Information: | | | | |
| 7. What kind of paid or unpaid work experience have yo | yy had? * | | | |
| | | | | |
| 8. List all community activities (and estimated hours pe school, community college, or current CSUF years. * | r week) in whic | ch you were ir | nvolved during your high | |
| Community Activities | Hours p | er week | Number of weeks per year | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 9. List all honors and awards you have received and the | year that you r | eceived them | .* | |
| Honors and Awards | | Year | Received | |
| | | | | |
| | | | | |
| 1 | | | | |

^{*}if additional room is needed you can provide a second page.



Essay

You may type your essays on a separate page (please note the word count) and attach them to your application. You must complete this essay in order for your application to be reviewed. If one essay is missing, your application will be considered incomplete and will not be reviewed by the selection committee.

| Essay Question: | |
|--|---|
| What motivates you to pursue a college degree? (500 words) Describe any particular circumstances, experiences, family background, academic interest/curiosity, or other influences that have inspired you to excel academically and pursue a college degree. | |
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| Application Certification | |
| | form is true and complete to the best of my knowledge. I will use the Abrego Future tional expenses related to my attendance at California State University, Fullerton. |
| Signature: | Date: |



Recommender Evaluation Form

To the Student Applicant:

Fill out your personal information below. Then, please give this form to someone who knows you well (e.g. teacher, counselor, minister, work supervisor, etc. Not a relative) and can evaluate you appropriately. Ideally, this individual should be able to comment on your academic preparation, school and community involvement, and other relevant background prior to enrollment at CSU Fullerton.

| Last Name | First Name | |
|------------------------|---------------------|--|
| | CSUF Campus Wide ID | |
| Preferred Phone Number | Email | |
| Student Signature | Date | |

To the Recommender:

The above-named student is applying for a scholarship to be given to outstanding students, for the 2016/2017 academic year. *The general criteria for selection* are academic excellence, outstanding personal qualities, contributions to school and community, and a disadvantaged background due to socioeconomic, environmental, or educational challenges.

On the scale below, please rate the applicant with a check mark under the appropriate column.

| | Outstanding | Excellent | Good | Average | Unable to Rate |
|----------------------------|-------------|-----------|------|---------|-------------------|
| Ability in Written | | | | | |
| Expression | | | | | |
| Ability in Oral Expression | | | | | |
| Initiative | | | | | |
| Integrity | | | | | |
| Maturity | | | | | |
| Resilience | | | | | |
| Civic Engagement | | | | | |
| Potential | | | | | |
| Consideration of Others | | | | | |
| Interaction with Others | | | | | |
| Leadership Potential | | | | | |



| How long have you known the applicant? | |
|---|---|
| In what capacity? | |
| Please address the following regarding the ap | oplicant below or in a letter: any situations or incidents neir strengths and weaknesses, and any additional |
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| | |
| Overall recommendation for scholarship | o selection: |
| ☐ Strongly recommend | |
| ☐ Recommend | |
| ☐ Recommend with reservation | |
| ☐ Do not recommend | |
| Recommender Name: | Please print or type |
| Recommender Signature: | |
| | |
| | Employer: |
| Preferred Phone Number | Email |

Upon completing this form, you may return it to the student in a sealed envelope. If preferred you can send it directly to the coordinator via email to jehamilton@fullerton.edu or fax to (657) 278-1509. Please