



## CWI Hispanic Healthcare and Technology Careers Conference Scholarship

*Return Completed Applications to:*

College of Western Idaho  
Attn: Luis Caloca  
MS 1000  
P.O. Box 3010  
Nampa, ID 83653

**Complete scholarship application packets must be postmarked (or received if hand-delivered) by  
\*\*\* March 25, 2023 \*\*\***

### **Description of Scholarship**

*This is a \$1000 first year scholarship to attend College of Western Idaho to pursue a degree in a healthcare or technology field. The award is in recognition of academic and vocational achievement, demonstrated leadership in school, community or other service activities. Applicants must be accepted and enrolling or enrolled at CWI for the Fall 2023 semester.*

### **Qualifications**

#### **The applicant must:**

- Submit a complete application packet by March 25, 2023.
- Attend the Hispanic Healthcare and Technology Careers Conference on April 15, 2023.
- Must be in good standing and making satisfactory progress (as formally defined by the institution) toward the student's program objective (degree, diploma, or certificate).
- Must have a cumulative Grade Point Average of 2.5 and above.
- Be a graduating high school student in Idaho.
- Have demonstrated leadership in school, community and/or other service organizations that promote, enhance or strengthen diversity.
- Live in Idaho and of Hispanic/Latino/a/x descent

## **Scholarship Application Packet must contain:**

1. A completed and signed CWI HHTCC Scholarship Application
2. A one page biography
  - Be sure to include any pertinent information you may want to convey to us regarding your personal family background and history; academic, leadership and community service experience; your plan of study and future goals.
3. A two page max resume of scholarly or vocational accomplishments, honors, special awards or recognition you have received, community and school involvement to include leadership positions and/or activities. Do not include copies of certificates or other documents.
4. Write a three to five page essay, double-spaced, 12-point font on the following subject:
  - What can colleges do to encourage Latino/a/x students to stay in college and graduate?
  - What can you do to encourage Latino/a/x students to stay in college and graduate?
5. A copy of applicant's high school transcript
6. One letter of recommendation. A letter from an individual qualified to judge your academic, leadership, and personal qualifications. Counselor or teacher is recommended.

## **Processing of Applications:**

- Applications are due by **March 25, 2023**.
- All applications will be reviewed by CWI Staff.
- Applications will be scored based on the following criteria:
  - Quality of essay
  - Academic achievement
  - Demonstrated leadership qualities
  - Involvement in service to school, community, family
  - Financial need
- All scholarship winners will be notified by mail or phone call.
- **Do not** use staples in your submission.



# 2023 CWI Hispanic Healthcare and Technology Careers Conference Scholarship Application

*Application Deadline: March 25, 2023*

**PLEASE PRINT CLEARLY**

**Full Name:** \_\_\_\_\_  
Last First Middle

**Address:** \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip County

**Phone Number:** (\_\_\_\_\_) \_\_\_\_\_

**Cell Phone:** (\_\_\_\_\_) \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Birth Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
mm/dd/yyyy ex: 01/17/1994

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

**Address:** \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip County

**I am of Latino/a/x Descent:**  Yes  No **Gender:**  Male  Female

**How many years have you resided in Idaho** \_\_\_\_\_

**Name of High School:** \_\_\_\_\_ **Year of HS Graduation:** \_\_\_\_\_

**High School Cumulative GPA:** \_\_\_\_\_

**What major will you study:** \_\_\_\_\_

**Household Income:**       \$1 to \$15,000       \$15,001 to \$30,000       \$30,001 to \$45,000  
(Please check one)       \$45,001 to \$60,000       \$60,001 to \$75,000       \$75,or more

**How many are in your household?** (include all adults and children): \_\_\_\_\_

**Certification:**

I understand and agree to the terms and conditions of applying for and receiving this scholarship. The answers given on this application are true and complete. I hereby authorize information regarding my scholarship application, academic record and financial aid award to be released to the College of Western Idaho and that CWI may share this information to 3<sup>rd</sup> parties for the purpose of soliciting additional student supports. The review committee may require additional documentation to verify the completion or accuracy of this application. I certify that the information given on this application is complete and correct to the best of my knowledge.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_