



**A Non-Profit Organization**

**[www.garfielalumfnifoundation.org](http://www.garfielalumfnifoundation.org)**

**SCHOLARSHIP APPLICATION  
DEADLINE: 2<sup>ND</sup> Friday of April**

**P. O Box 3308 ♦ Montebello ♦ CA ♦ 90640  
323-266-0100**



Garfield High School  
 Alumni Foundation/Dollars for Scholars  
 Scholarship Application  
**DEADLINE – On or Before 2nd Friday of APRIL**  
 (Please submit hard copy application to the Career/Counseling Office)

Name \_\_\_\_\_

	<b>First</b>	<b>Middle</b>	<b>Last</b>
Address _____			
	<b>Street</b>	<b>City</b>	<b>Zip code</b>

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Gender: M F Cumulative (SIS) G.P.A \_\_\_\_\_ Current Class Rank \_\_\_\_\_

List highest scores earned (or write “not taken”) for: ACT \_\_\_\_\_ SAT1 \_\_\_\_\_

What activities and clubs are you involved in at Garfield? \_\_\_\_\_

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What leadership responsibilities do you assume in school? \_\_\_\_\_

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What activities, clubs, or volunteer work are you involved in or outside of school? \_\_\_\_\_

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What other responsibilities do you carry before or after school? \_\_\_\_\_

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Anticipated University/College Major: \_\_\_\_\_

List the college(s) that you have applied for, or plan to apply for (list no more than 6)


**Required Documentation:**

*Please attach two letters of recommendation from teachers, guidance counselor, community members, employer or clergy person.*

*Please attach a short essay to answer the following: “Tell us about a personal quality, accomplishments, or volunteer experience that is important to you and describe how this relates to your future endeavor.”*

# GARFIELD ALUMNI FOUNDATION MEDIA RELEASE FORM



**Student Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
**Number** **City** **Zip code**

**Telephone#:** \_\_\_\_\_

**We are requesting authorization to submit your name and biography to the media for publication and recognition.**

**We will not share any personal information other than your name and a short statement of your goals and objectives.**

\_\_\_\_\_  
**Students Signature/Date**

\_\_\_\_\_  
**Parents Signature/ Date**