

APPLICATION CHECKLIST

NOTE: This packet is only for dependents of Ventra Unified <u>CLASSIFIED</u> Staff whom are due paying members of VESPA

Dear Applicant,

The enclosed application packet includes several documents. Please use the checklist below as a tool to ensure that you submit your application with all of the required documentation.

DEADLINE: All scholarship applications are due no later than 4:00 p.m. on Friday, May 10, 2024.

SEND APPLICATIONS: through inter-district brown mail, in person, or by U.S. mail service to:

VESPA Office 5280 Valentine Rd., Suite 202 Ventura, CA 93003

Thank you for taking the time to apply for one of VESPA's scholarships. We are excited to know that you are taking your education to the next level. It is our hope that you are successful in your journey.

4	Applicant Information Dags (page 4)	
1.	Applicant Information Page (page 1)	
2.	Personal Reference Page (page 2) Sealed in an envelope	
3.	Scholastic Reference Page (page 3) Sealed in an envelope	
4.	Brag Page (pages 4 & 5)	
5.	Official Transcripts in Sealed Envelope- Sealed in an envelope	
6.	A ONE page typed personal statement emphasizing why you believe you should be chosen as a scholarship recipient. (page 6)	
7.	Copy(s) of college acceptance letters	

FAILURE TO PROVIDE ALL ITEMS LISTED ABOVE WILL BE CONSIDERED GROUNDS FOR DISQUALIFICATION

Best of luck to you! Sincerely,

VESPA Scholarship Committee



APPLICANT INFORMATION PAGE

The Scholarship Committee would like to thank you for applying for this scholarship. All information contained in this application is and will remain confidential. At the end of the year, all confidential documents pertaining to the applicant will be shredded and properly discarded. It is imperative that this application is accurately and completely filled out. All application pages must be legible. Failure to provide a completed, accurate application is considered grounds for disqualification.

Applications are due by 4:00 p.m. on Friday, May10, 2024.

Select the type of scho are applying. Mark onl		hich you	Merit	Scholarsh	ip			Nee	d Scho	larship	ρ		
Last Name:				First N	ame:								
Mailing Address:				City			Sta	ite		Z	'ip		
Birth Date: (mm/dd/yy)	/ /	E-mail	Addres	S		@			Curre	ent Gr	ade		
Home Phone #	() -		Cell P	hone #	()	-		Other	#	()	-	
Expected graduation d	ate:	/ /		From wh	ich high sch	nool will yo	ou gra	duate?					
Please provide us the name of the VESPA member by which you are eligible to apply for this scholarship. VESPA Member's Name Relationship to the													
& Job Site: Members Date of (mm/dd/yyyy)	Hire	/ /			Date Men	pplicant: nber Reach m/dd/yyyy		ermane	nt			/ /	
Please list the schools/colleges to which you have submitted a formal application for admission. If you have been formally accepted to a school, please place a check in the left hand column and attach a copy of the school's letter of acceptance to your VESPA scholarship application.													
School/Colleg	ge:								()	-		
School/Colleg	ge:								()	-		
School/Colleg	ge:								()	-		
School/Colleg	ge:								()	-		



PERSONAL REFERENCE PAGE

Directions for persons submitting this Personal Reference Page:

- Must be someone other than family member.
- Place completed Personal Reference Page in a *sealed envelope* and returned to the applicant.

Directions for applicant:

• Return sealed envelope with your VESPA Scholarship Application

Applicant's Last Name Applicant's		Applicant's First Na	me				
1.	What is the nature and extent of your acquaintance with the applicant?						
2.	2. Why do you feel that this applicant should be considered for this scholarship?						
3.	What is your impress	ion of his/her character traits such as	responsibility, reliability a	and integrity?			
4.	Are you familiar with the applicant's involvement and participation in community activities? If yes, please describe.						
5.	5. Do you know if the applicant has received any special awards or made any special achievements? If yes, please describe.						
6.	6. Is there any additional information that you feel we should know about the applicant?						
Nam	Name of the person completing this form: Relationship:						
Plea	se list a phone number	where we may contact you:	() - Ext:			
Sign	ature:			Date (mm/dd/yy):			



SCHOLASTIC REFERENCE PAGE

Directions for person completing this form:

- Must be a Teacher, Counselor or Administrator
- Place completed Scholastic Reference Page in a sealed envelope and return to applicant

Directions for Applicant:

• Return sealed envelope with your VESPA Scholarship Application

Ар	pplicant's Last Name	Applicant's First Name						
1.	What is the nature and exter	our acquaintance with the applicant?						
2.	. Why do you feel that this applicant should be considered for this scholarship?							
3.	What is your impression of h	school citizenship record?						
4.	Are you familiar with the app describe.	Are you familiar with the applicant's involvement and participation in school and community activities? If yes, please describe.						
5.	Are you familiar with any spe	Are you familiar with any special achievements or awards that the applicant has received? If yes, please describe.						
6.	Please verify the applicant's semester of their senior year	stic record. Mark point average should be cumulative for grades 9, 10, 11, and the	ne first					
	Mark point average:	Current standing in class:						
	Is the applicant currently me	all graduation requirements? Yes No						
Naı	me of the person completing the	m: Position/Title:						
Ple	ease list a phone number where	nay contact you: () - Ext:						
Sigi	nature:	Date (mm/dd/yy):						



BRAG PAGE

Directions for applicant:

- Please be specific, precise and clear with your involvement in school and community activities.
- Do not use acronyms.
- If additional space is needed please make sure you follow the format of this "Brag Page"

Applicant's Last Name		Applicant's First Na	ame
	Dates of Involvement	Honors (academic courses)	Awards
1.	to		
2.	to		
3.	to		
4.	to		
5.	to		
6.	to		

	Dates of Involvement	School Related Activities	Leadership	Awards
1.	to			
2.	to			
3.	to			
4.	to			
5.	to			
6.	to			
7.	to			
8.	to			
9.	to			



BRAG PAGE CONTINUED

Directions for applicant:

- Please be specific, precise and clear with your involvement in school and community activities.
- Do not use acronyms

Арр	licant's Last Name		Applic	ant's First Name	
	Dates of Involvement	Community Service/Activities	Lea	ndership	Awards
1.	to				
Addi	tional information:				
2.	to				
Addi	tional information:		ı		
3.	to				
Addi	tional information:				
4.	to				
Addi	tional information:				
5.	to				
Addi	tional information:	•			
6.	to				
Addi	tional information:	'		'	
					.,
	Dates of Involvement	Work Experience		Leadership	Awards
1.	to	work Experience		Leadership	Awdius
2.	to				
3.	to				
4.	to				



PERSONAL STATEMENT						
Applicant's Last Name		Applicant's First Name				

Write a *ONE-page* statement emphasizing why you believe you should be chosen as a scholarship recipient. (Typed and double-spaced. No more than ONE page)