



Kauai Filipino Chamber of Commerce Foundation

2024 VOCATIONAL SCHOLARSHIP PROGRAM

Student/Resident

PURPOSE

- The purpose of the scholarship is to assist student/resident who otherwise do not qualify for scholarships based on academic achievements.
- Kauai residents who want to develop a vocational skill.

ELIGIBILITY APPLICANT MUST:

- Be a resident of Kauai County and be of Filipino ancestry. Children or grandchildren of KFCC (Kauai Filipino Chamber of Commerce) member in good standing.
- Be accepted in a vocational program at Kauai Community College or currently attending a vocational program at Kauai Community College.

RECIPIENTS MUST PROVIDE PROOF OF ACCEPTANCE INTO A VOCATIONAL PROGRAM.

JUDGING CRITERIA

FINANCIAL NEED

- Applicants must demonstrate a financial need. Must have applied for FAFSA (Free Application for Federal Student Aid). SAR (Student Aid Report) must be submitted with this application. No exceptions will be made.

SCHOLASTIC

- Must have maintained a minimum of a 3.0 cumulative Grade Point Average (B average) on a 4.0 scale.
- Current KCC Students: Submit official KCC transcripts
- Accepted KCC Vocational Student (no vocational classes taken yet): If graduated high school within the last 3 years, submit "high school" transcripts. If more than 3 years, please submit a resume.

RESUME - ACADEMIC ACHIEVEMENTS, LEADERSHIP AND COMMUNITY SERVICE

- **FORMAT:**
 - o Education
 - o Work Experience
 - o Volunteer/Leadership Experience
 - o Awards and Honors Receives
 - o Special Skills & Talent
 - o Interest and Activities

ESSAY OR PERSONAL STATEMENT OR ESSAY

- Personal statement on why you are applying for a scholarship which includes how your vocational skills will help the community. Minimum of 400 words typewritten.

TWO (2) LETTERS OF RECOMMENDATIONS

- Letters from employers, ministers, or any non-related individuals who can attest to applicant's character and potential.



2024 VOCATIONAL SCHOLARSHIP PROGRAM Student/Resident

Please print or type (all items must be completed).

Name _____
Last First MI

Home Phone _____ Mobile Phone _____

Email _____

Mailing Address _____

City _____ State _____ Zip _____

Date of Birth _____

Parent or Guardian's Name _____
Last First Phone:

High School Attending _____ Counselor's Name _____

Name of vocational program which you have been accepted: _____

Please mail this application, along with two (2) letters of recommendation, specified transcripts, FAFSA, SAR (Student Aid Report), resume and a photo of self to:

SCHOLARSHIP PROGRAM
Kaua'i Filipino Chamber of Commerce
P.O. Box 3618, Lihue, HI 96766

For more information or questions, please email: info@kauaifilipinochamber.org

Application deadline: Postmarked by **March 31, 2024.**

All applications and furnished materials will become the property of Kaua'i Filipino Chamber of Commerce and will not be returned. Acceptance of the Kaua'i Filipino Chamber of Commerce Scholarship automatically gives Kaua'i Filipino Chamber of Commerce all publishing and advertising rights, including name, photo and essay of all scholarship recipients.

I certify that all the furnished information and records are true and accurate.

Applicant's Signature _____ Date _____

A FULLY COMPLETE AND ACCURATE APPLICATION FORM MUST BE SUBMITTED BY THE DESIGNATED DEADLINE IN ORDER TO BE CONSIDERED FOR THE SCHOLARSHIP.