

HMONG HOME HEALTH CARE SCHOLARSHIP

APPLICATION PACKET



PRESENTED BY
THE HMONG AMERICAN EDUCATION FUND

www.thehaef.org



This scholarship was made possible and donated by
Hmong Home Health Care, Inc.

Instructions for the Hmong Home Health Care, Inc. Scholarship

This scholarship is presented by the Hmong American Education Fund and donated by Hmong Home Health Care, Inc. The scholarship seeks to financially support one student in the pursuit of their higher educational goals. The successful applicant will be awarded up to \$3,000 to the choice of their college or university. Download this application packet and fill out the form below. **All application materials are due by April 30.** Late applications and materials will not be considered. Any hand-written application will be disqualified. All application materials must be emailed to hmongeducationfund@gmail.com. You will be notified of your application status via email by or after June 1.

Applicants Must Meet All Criteria Listed

- A U.S. citizen or legal resident alien
- A Minnesota resident
- Any person of Hmong descent
- Any high school senior, high school or GED graduate or current college/graduate student is eligible
- Has been accepted fulltime to a 2-year or 4-year college/university or graduate school
- Majoring in Healthcare, Social Services, or related fields
- Has a minimum GPA of 3.0 in a 4.0 scale system

Scholarship Application Packet, Checklist

- A completed application
- Essay (1500 words or less)
- Copy of unofficial transcript
- One letter of recommendation
- **Submit all required application documents in PDF format to hmongeducationfund@gmail.com**

A Successful applicant must demonstrate the following

- Pursue an education to better themselves and others
- A commitment to excellent academic achievement
- A commitment to helping your community
- This is a merit scholarship. Need base not necessary

Essay: In one essay, 1500 words or less, please answer the following questions

- Tell us about your educational accomplishments
- Tell us some of the things you have done to help your community
- Tell us your needs and how this scholarship can help you

Additional Requirements

- Recipient is expected to attend the Scholarship Awards Banquet on the first Saturday of August.
- If selected, recipients are expected to submit the documents requested for the Scholarship Awards Banquet (ex. photo, bio, thank you letter to donors)

Successful applicants are encouraged to attend two general academic coaching, and mentoring sessions with

HAEF. These sessions can be done via phone, e-mail or face to face.

(If you have any questions, please email: scholarships@thehaef.org)



Hmong Home Health Care Scholarship Application

(Type responses below & email back to hmongeducationfund@gmail.com along with all other required documents in PDF)

Last Name:	First Name:	Middle:
Home Phone:	Cell Phone:	E-Mail:
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	Date of Birth (mm/dd/yyyy):	Race/Ethnicity:
Current Address:		
City:	State:	Zip Code:
Permanent Address (if different from above):		
City:	State:	Zip Code:
Check one of the following: <input type="checkbox"/> U.S Citizen <input type="checkbox"/> Legal Alien Resident of U.S. <input type="checkbox"/> None	Are you a first generation student? <input type="checkbox"/> Yes <input type="checkbox"/> No	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed
Number of parent(s):	Family size:	Number of dependents (if applicable):
Are you currently in high school or pursuing your GED? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Name of your current School:		Current GPA:
School Address:		
Name of College/University you have been accepted to and/or will be attending:		
Major/Program:		
Degree you are seeking: <input type="checkbox"/> Associate <input type="checkbox"/> BA/BS <input type="checkbox"/> Masters <input type="checkbox"/> PhD/Doctorate <input type="checkbox"/> Other:		
What year of schooling are you in: <input type="checkbox"/> First Year <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior		
Will you be a Fulltime Student: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you been awarded other scholarships or financial assistance? (If yes, please list them):		
Print Name:	Signature:	Date:
Disclaimer: By signing this application I understand that the information provided is true to the best of my knowledge. HAEF reserve the right to verify information submitted on the successful candidate's application. In addition, the views and opinions expressed by individuals and/or businesses featured in our scholarships do not necessary represent the views of the Hmong American Education Fund.		