



SCHOLARSHIP APPLICATION

*Please consider my candidacy for the **Community Outreach Scholarships**.*

I have fully completed this application and have included my letter of candidacy and my official school transcript.

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____

EMAIL ADDRESS _____

HIGH SCHOOL _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

My signature below verifies the accuracy of all details I have provided in submitting this application.

SIGNATURE

DATE

The enclosed transcript verifies my high school's official record of my academic achievement.

This fully completed application and the two required enclosures must be received at our office.

Mail required application materials to our offices:

Universal Vocational Institute: Community Outreach Scholarships Program

5339 W 20th Ave, Hialeah, FL 33012

Telephone contact and email contact are unavailable. Scholarship recipients will be informed of their award in the next month after submitted the application. No other candidates will be informed of the committee's award decisions.

We thank all applicants for their interest and wish them success now and in their professional futures.