



2019 HOPE SCHOLARSHIP Application

Deadline, June 30, 2019



PLEASE TYPE AND RETURN THIS FORM TO YOUR SAEP ADVISOR OR EMAIL earriola@saedpartnership.org ON OR BEFORE June 30, 2019.

SCHOOL		CURRENT GRADE LEVEL	DATE OF BIRTH (MM/DD/YYYY)
LAST NAME	FIRST NAME	MIDDLE INITIAL	GENDER <input type="radio"/> FEMALE <input type="radio"/> MALE <input type="radio"/> UNDECLARED
			ETHNICITY <input type="radio"/> AFRICAN AMERICAN <input type="radio"/> ASIAN <input type="radio"/> HISPANIC <input type="radio"/> WHITE <input type="radio"/> OTHER
STUDENT EMAIL		STUDENT CELL PHONE #	ARE YOU A DEPENDENT OF A CPS ENERGY EMPLOYEE/RETIREE? (If yes, please fill out HOPE Scholarship Dependent Eligibility Form) <input type="radio"/> NO <input type="radio"/> YES
HOME ADDRESS		CITY	ZIP CODE
DID YOUR PARENTS EARN A 4 YR BACHELORS DEGREE? <input type="radio"/> NO <input type="radio"/> YES		DID YOUR PARENTS RECEIVE THEIR HIGH SCHOOL DIPLOMA OR GED? <input type="radio"/> NO <input type="radio"/> YES	
PARENT/GUARDIAN NAME	PARENT/GUARDIAN E-MAIL	PARENT/GUARDIAN CELL PHONE #	ARE YOU/YOUR PARENTS/GUARDIANS/SPOUSE A VETERAN OR ACTIVE MEMBER OF THE MILITARY? <input type="radio"/> NO <input type="radio"/> YES

WHAT IS YOUR CURRENT GPA ON A 4.0 SCALE? _____

WHAT ARE YOUR EDUCATION PLANS? (Check one) Attend 2-year College Attend 4-year University Graduate Degree

COLLEGE/UNIVERSITY: _____ MAJOR/CAREER? _____

In 250 words, tell us of one person that has guided you throughout your life and ultimately motivated you to pursue a college education. Write about this person and what they did to help you along the way. You may attach a separate page if needed.



**2019 HOPE SCHOLARSHIP CRITERIA
CPS Energy service area students ONLY**

(Permanent address or parent/guardian address or currently attending college in CPS Energy service area):

- **(2) \$2,250 Patricia Ana Garcia Escobedo Texas ONLY CPS Energy employee dependents**
Dependents must include the [HOPE Scholarship Dependent Eligibility Form](#) with their application.
- **Total of two scholarships**

1. Scholarships open to students graduating from high school (GED).
2. Applicants must attend the college indicated on scholarship application and provide a class schedule or scholarship may be forfeited at the discretion of the HOPE executive board.
3. May pursue an undergraduate degree in any concentration.
4. No income requirement is set forth. However, colleges/universities require applicants to fill out a Free Application for Student Financial Aid (FAFSA).
5. Have and maintain a 2.75 GPA or above based on a 4.0 scale each semester.
6. Complete the essay prompt.
7. Please attach a resume detailing your community service.
8. Provide one letter of recommendation from a individual (non family) who can speak to your leadership.
9. Must maintain full-time enrollment status as defined by university or college throughout the duration of the scholarship term.
10. Recipients are required to attend the HOPE Hispanic Heritage Banquet, which is usually held in September.
11. Funds will be distributed directly to the institution of higher learning selected after the census date.
12. Incomplete applications will not be considered

STUDENT SIGNATURE

DATE



**SCHOLARSHIP DEPENDENT
ELIGIBILITY FORM**

I, _____, certify that _____ is my dependent
Print Print
and that I am employed by or retire from CPS Energy. I also authorize any HOPE officer
to verify my employment or past employment and eligibility requirements with CPS Energy.

Student Signature

Date

Parent or Legal Guardian

Date

HOPE Officer

Date