



27 W. Columbia St. Suite 202
Hempstead, NY 11550
(631) 742-0689
dream.foundation.li@gmail.com
nydreamfoundation.org

“DREAM” Scholarship – 2018

Awarded to full-time students:

- 1 Award of \$15,000
- 1 Award of \$10,000
- 3 Awards of \$3,000
- 10 Awards of \$1,000

Criteria:

1. Full-time college or university students who do not qualify for state or federal financial aid because of their immigration status.
2. Applicants must reside on Long Island and be current high school seniors or graduates, including current college students.
3. Scholarships are awarded by the Scholarship Committee taking into consideration the complete application form, supporting documentation and a personal interview.
4. The application is published in our webpage www.nydreamfoundation.org. Details of the 2018 DREAM Foundation scholarship will be released in a news conference (place and date will be announced).
5. Application form and supporting documentation can be scanned and sent in a PDF file to DREAM.foundation.LI@gmail.com or send by mail to:

DREAM FOUNDATION

*ATTN: Scholarship Committee
27 West Columbia St. Suite 202
Hempstead, NY 11550*

6. Application deadline is Monday, April 30.
7. Selected students will be notified for a personal interview with the Scholarship Committee. Interviews will take place on May 10 and 11 at the foundation office.
8. Recipients of the awards will be notified by May 13.
9. To receive the scholarship check, grantees must bring a proof of college enrollment for the fall semester 2018.
10. Scholarship recipients will receive the amount awarded over a period of two years, 50 percent at the beginning of each winter semester, as long as the student maintains the requirements established in his / her scholarship application.
11. Scholars must attend a news conference announcing the winners and an awards dinner scheduled on Saturday, September 15 in Westbury, NY.

“Everyone is born with unlimited potential to achieve greatness. It is my greatest honor to help unlock that potential and to provide a helping hand to students who are willing to work hard to achieve their dream.”

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Scholarship Application - 2018

- Please, fill the complete application and attach to it all kinds of supporting documents to allow the Scholarship Committee to evaluate your file.
- Attach also school ID, and state / government issued ID, or foreign passport.
- Attach supporting documents such as high school official transcript, your college records, school letters, certificate of recognitions, proof of community services, proof of volunteer work, proof of working, sport recognitions and others.

I APPLICANT INFORMATION

1.Last Name			First Name			Middle		
2.Home Address								
3.Date of Birth (mm/dd/yyyy)			4.Place of Birth			5.Citizenship		
6.Telephone numbers						7.E-mail:		
Home ()			Cell ()					
8.Current mailing address, if different from above:								
9.Name of the High School you graduated from:						11.Year of Graduation:		
10.Address:						12.Graduation GPA:		
13.Name of college or university you are attending:						15.GPA:		
14.Address:						16.Year you expect to graduate:		
17.College program:						18.My DREAM is to become a/an:		

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II PERSONAL STATEMENT (350 words)

- About your difficulties, and challenges you faced to reach your educational goals.
- Your professional aspirations: why you chose your career path?
- How will the DREAM Scholarship help you and why should you receive the scholarship?
- What were your extracurricular activities?
- Have you done community work?
- Do you work?

Statement must be typed and printed on a separate sheet of paper.
 Use additional sheets as need.

III QUESTIONARY

Name of colleges/universities you applied:

Name	Accepted	Denied	Waiting for response
1.-			
2.-			
3.-			
4.-			
5.-			

College/university you will attend (attach proof of acceptance / enrollment)

Have you ever been arrested / cited / charged with any crime No Yes
IF YES, attach a scanned copy of the Certificate of Disposition. Explain the nature of the arrest in your own words:

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What extracurricular activities have you participated in?

Community Service/Volunteer work:

Work Experience:

Explain you financial difficulties:

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Hobbies:

Others:

SIGNATURE

I certify that all information submitted in this application are true and correct. I certify that all information submitted, including the personal statement, any supplements, and any other supporting materials – is my own work, factually true, and honestly presented. These documents will become the property of the Dream Foundation to which I am applying to and will not be returned to me. I agree to appear for an interview, should it be deemed necessary.

Signature _____ **Date** _____

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CODE OF CONDUCT AGREEMENT

I, _____ hereby state that the materials submitted are true and correct. I agree to uphold the Code of Conduct of my university. I understand that violation of this Code of Conduct or any arrest during my freshman or sophomore may result in automatic revocation of the Dream Foundation scholarship grant, upon which I will be required to reimburse the DREAM Foundation.

_____, New York

On this __ day of _____, 2018

Signature _____

Note: This document needs to be notarized.

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PHOTO RELEASE

I, _____ hereby grant permission, without reservation, to the DREAM Foundation to take photographs and to make recordings of me, and to use them in original or modified form in all media now or hereafter known, with or without my name or information about me for the promotion, public education, and/or fundraising activities of the DREAM Foundation. I am entitled to receive no compensations for the above.

I hold harmless and release and forever discharge the DREAM Foundation, and its members of the board from all claims, demands and causes of action that I or other person acting on my behalf.

I agree that the DREAM Foundation will be the sole owner of all tangible and intangible rights in the above-mentioned photographs and recording, with full power of disposition.

Signature

Date signed

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PHOTO RELEASE FOR UNDERAGE STUDENTS

I, _____ hereby grant permission, without reservation, to the DREAM Foundation to take photographs and to make recordings of my son/daughter, _____, and to use them in original or modified form in all media now or hereafter known, with or without his/her name or information about him/her, for the promotion, public education, and/or fundraising activities of the DREAM Foundation. My son/daughter is entitled to receive no compensations for the above.

I hold harmless and release and forever discharge the DREAM Foundation, and its members of the board from all claims, demands and causes of action that I or other person acting on my behalf.

I agree that the DREAM Foundation will be the sole owner of all tangible and intangible rights in the above-mentioned photographs and recording, with full power of disposition.

Name (print)

Signature

Date signed

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