

Student Application

Sister Carmen de Barros Scholarschip

HISPANIC VALUES

Religiosity
(Faith)

Family
(Community)

Hospitality
(Food/ Music)

Language
(Proud to speak Spanish)

Name _____

Home Address _____

City, State, Zip _____

Elementary School address _____

Principal's Name _____

Catholic High School You Plan to Attend: _____

High School's Address: _____

List the names and ages of your brothers and sisters still supported by your parents.

How do you evaluate your performance in elementary school?

___ Outstanding ___ Above Average ___ Average ___ Fair

Contact info: phone _____ Parent's email _____

Does a parent text? _____ in English? _____

Write a paragraph or two about the Hispanic values that are a strong part of your character. In the next paragraph, what activities/services do you participate in at your school, parish, or community that demonstrate these principles? Do this in ink or typed AND in English. (If any requested materials are missing, you will NOT be considered.)

Student's Signature _____

Parent or Guardian's Signature _____