North American Division Graduate Hispanic Scholarship Fund

The North American Division Hispanic Scholarship Fund is designed to assist with financial aid for full-time graduate and post-graduate Hispanic students who are North America Division-based, faithful Seventh-day Adventist Church members in good standing, and whose financial resources are inadequate to enable them to complete their graduate school education.

This fund is limited and disbursed on the basis of need, academic performance and church standing. The North American Division's Hispanic Scholarship is distributed according to the parameters established by the NAD's working policy.

Eligibility

- 1. The applicant **must** be a Seventh-day Adventist church member in good standing.
- 2. The applicant **must** be Hispanic, North American Division-based (intending to live and work in the United States, Canada, Bermuda, Guam or Micronesia), and a citizen or permanent resident of the United States, Canada, Bermuda, Guam or Micronesia. Students from other divisions who are in the United States or Canada for educational purposes are excluded from this funding source.
- 3. The applicant **must** be an **enrolled full-time** student (or taking a minimum of 12 hours per semester) in a **graduate professional school**. Undergraduate, vocational or students seeking a certificate program do not qualify for this scholarship. Preference will be given to students attending Seventh-day Adventist institutions; however, grants may be awarded to students attending other accredited schools offering studies in approved areas.
- 4. The applicant **must** submit verification of financial need based on information requested in the application, and must be earning satisfactory grades.
- 5. In cases where family income is comparable, priority in the allocation of the funds will be given to students who are from non-church-worker families.
- 6. If the applicant is married, only one family member is eligible for this scholarship assistance in a given year, except in unusual circumstances.
- 7. A student may receive the scholarship **once per school year**. The applicant must request and complete a new application and submit it for approval each year.
- 8. A student who is a member in a Seventh-day Adventist Hispanic Church that belongs to a Regional Conference needs to apply to the Regional Scholarship.

Approved Courses of Study

Accounting Audiology

Business Administration

Communication
Computer Science

Dental Dietetics

Elementary and Secondary Education

Engineering

Food Administration Hospital Administration Industrial Education

Journalism

Law

Medical

Nursing

Pharmacy

Physical Therapy

Physician's Assistant

Psychology

Public Health

Social Work

Speech Pathology

Instructions

- 1. Complete and sign the student portion of the application.
- 2. If applicable, ask your parents to complete their financial section.
- 3. Ask your school registrar to verify your cumulative grade point average (GPA) and confirm that you are a full-time student taking a minimum of hours as required per school year.
- 4. Request the stipulated signatures from your local conference Hispanic coordinator/director or your local union Hispanic coordinator/director **must** sign the application form. If you do not know who that person is, ask your Hispanic church pastor. The Hispanic coordinator/director will discuss with you your eligibility and will sign the form.
- 5. **Make a copy of the completed application** with the information and signatures for your records. This is very important, as some forms get lost in the mail.
- 6. Mail only pages 3 6 of this document to the office of:

Elder Minervino Labrador Jr. NAD Vice President 9705 Patuxent Woods Drive Columbia, MD 21046-1565

7. Applications are **due** February 28 or September 28. The NAD Committee meets to approve scholarship grants. After the committee's approval, the treasury office will issue a check for the approved amount or the NAD Vice President will send a letter explaining why you aren't eligible.

FOR OFFICE USE ONLY
The NAD Hispanic Scholarship Committee and the NAD Committee for Administration have:
• Approved this scholarship request for \$
Denied this scholarship request due to
Department Signature



North American Division Graduate Hispanic Scholarship Application

Last Name _____ Middle Initial ____

_____ State _____ Zip Code _____

M

F

Please print clearly. Attach a blank sheet if you need more space.

Address _____

Student Information

City ____

DOB _____

Phone	(Cell			
Email					
Marital Status	I	egal Status			
• Single		• U.S. Citizen			
• Married		• U.S. Permanent Resident			
• Divorced	•	• Other			
• Separated		Please specify			
Educational Information					
Graduate School presently attending					
Field of Study		De	gree soug	ght	
School's official web site					
Hours completed	_				
Current year in graduate program		2nd	3rd	4th	
Scholarship will assist school term beginning	g Month			Year	
Are you currently attending a SDA school?	Yes	No			
If not, please state your reason for attending a	a non-SDA so	chool			
Name of last school attended					
Degree earned					
	- 3	-			

Student's Financial Information

Are you currently employed Yes	s No		
Name of employer		Phone	
Address			
IRS gross taxable annual income (joint if	f married)		
Do you have any dependents	Yes	No If yes, how many?	
Have you previously received assistance	from the NAD	Hispanic Scholarship Fund?	
Yes No	Total rec	eeivedYear	
		Field of study	
Parent's Financial Inform	nation		
Parents' or guardians' names			
Address			
City		State Zip Code	<u> </u>
Phone		Cell	
Father's employer		Phone	
Mother's employer		Phone	
Parent's IRS gross taxable annual income	e (joint if marrie	ed) \$	
(Ministers should include parsonage exc	clusion.)		
Was the applicant claimed as a dependen	nt on parents' las	et tax return? Ye	s No
Parents' number of dependents	_		

Other Loans or Grants Received

Grant/Loan	Balance Owed	Monthly Payment	Payable

Current Financial Obligations

Creditor	Balance Owed	Monthly Payment	Purpose

Student's Proposed Monthly Budget

Monthly Income

Savings	
Parental Aid	
Student's Income	
Spouse's Income	
Loans	
Grants	
Scholarships	
GI Benefits	
Work/Study assistance	
Other Income	
Total \$	

Monthly Expenses

Tuition	
Fees	
Instruments	
Equipment	
Car Insurance	
Food	
Lodging	
Clothing	
Utilities	
Other	
Total \$	

Signatures

ALL sections must be completed and signed.

Applicant

Applicant's church membership is in			
Church Address			
I (print church pastor's name)	appı	rove this studen	t appli-
cant as a member in good standing and eligible for the North Arrequested.			
Church Pastor's Signature	Da	te	
Conference Coordinator/Director			
The Conference approv	es this applicant as elig	ible for a North	American
Division Hispanic Scholarship grant.			
Conference Hispanic Coordinator/Director			
Hispanic Coordinator/Director's Signature	Date_		
School Appraisal			
Name of graduate school:			
Applicant's cumulative GPA			
Is this applicant a full-time student or taking at least 12 hours?	Yes	No	
Remarks			
Signature of School Registrar			
Signature of School Financial Advisor or Treasurer			

Graduate School Seal