



**FRIENDS OF  
MONTEBELLO UNIFIED  
SCHOOL DISTRICT  
FOUNDATION**



**Friends of Montebello Unified School District Foundation in Partnership  
with Scholarships for Scholars of Montebello**

**Application Deadline: Friday, May 15, 2020 by 3:00 pm**

*Extensions (if any) will be announced on the FMUSDF and SSM websites*

**Amount of Scholarship:** This scholarship provides a onetime \$1,000 payment to entering college freshmen.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ CA Zip Code \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Name of High School \_\_\_\_\_

Father's Occupation: \_\_\_\_\_ Mother's Occupation \_\_\_\_\_

Family's Annual Income: \_\_\_\_\_

**Check all that are applicable below:**

- I am a participant in the "College Bound Today" program
- I am a participant in AVID (number of years) \_\_\_\_\_
- I am a participant in the Pathways to College & Career Success Program  
Name of Pathway \_\_\_\_\_

**Eligibility Criteria:**

- **Must be graduating from a high school in the Montebello Unified School District**
- **Must demonstrate financial need. Tax forms or FAFSA applications are accepted. (If AB540, please provide a copy of Dream Act Application)**
- **Must be applying, accepted or enrolled at an accredited institution of higher education as a full-time undergraduate student pursuing an academic/technical or academic or technical degree. Students enrolled in community or junior colleges are also eligible to apply provided they intend to enroll in and obtain a bachelor's degree from a four-year accredited institution.**
- **Minimum 2.75 GPA**
- **Two (2) letters of recommendation from a teacher, counselor or community member who is not a relative**
- **Letter of acceptance from a community college or four-year institution and/or proof of registration of classes. Proof of registration must have your name visible. Proof of registration in college classes must be provided to the FMUSDF before the scholarship check will be issued.**
- **Transcripts**
- **Personal Statements - must address both prompts, 1 and 2**

***\*Failure to provide all documents will result in immediate disqualification.***



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## Personal Statement Prompts

1. Write a Personal Statement about your world, including your background, community and/or family. Provide the reader insight into how your world has shaped your future goals.

**and**

2. Write a Personal Statement about a current or past experience in which you contributed to your community and what you would do to help improve the conditions in your community upon graduation and beyond.

Your essays should be one page in length, typed, double spaced, and in 12-point font.

You can scan and email all documents to:  
**ssofmontebello@gmail.com Attention: Vanessa Stinnett**

**Or**

Turn in all documents to your Counselor's office addressed to:  
**Vanessa Stinnett, Scholarships for Scholars of Montebello.**

**All documents must be received by Friday, May 15, 2020.**



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**The following Consent Form must be completed both by the student and their father/mother or legal guardians.**

**CONSENT FORM – MEDIA RELEASE**

I hereby consent, agree, and permit, The Friends of the Montebello Unified School District Foundation (FMUSDF) to publish my/my child's \_\_\_\_\_ (child's name), picture, image, written work, voice, along with verbal statements, and portraits (including still photographs and video records) or any photographs, publications, brochures, and/or public relations announcements related to any event connected to FMUSDF. For example, pictures reflecting FMUSDF activities or accomplishments may appear in local newspapers, in school district publications and even on television. These pictures, etc. may or may not personally identify the pupil, and these pictures may be used by FMUSDF in the future.

I further agree to waive any and all claims against FMUSDF from any and all claims, demands, causes of action, or judgements due to the use of my/my child's name, picture, image, written work, voice, along with verbal statements, and portraits (including still photographs and video records). Finally, I understand that if I intend to rescind this Consent, I may do so at any time by written notice to the FMUSDF.

**Dated:** \_\_\_\_\_, **20**\_\_\_\_\_.

**Student Name** \_\_\_\_\_(print)

**Student Signature** \_\_\_\_\_

**If student is under the age of eighteen (18) please complete the following:**

**Father/Legal Guardian name** \_\_\_\_\_(print)

**Father/Legal Guardian signature** \_\_\_\_\_

**Mother/Legal Guardian name** \_\_\_\_\_(print)

**Mother/Legal Guardian signature** \_\_\_\_\_