

Cielo Education Scholarship Fund
Application

Full Name: _____ Date of Birth: _____

Address: _____

Phone Number: _____ Email: _____

Current High School _____ Graduation Date: _____

Name of School you are interested in: _____

Certificate Interested in: _____

Approximate Cost of Program and Books: _____

Program Start Date: _____ End Date _____

Essay Portion: Please attach your typed essay. No less than one page.

Please tell us about yourself including your goals and interests. We value community service of all types, please tell us of any volunteer work in which you are involved. Please also tell us about the school and program you wish to attend and how this will help you achieve your career aspirations.

Please provide two letters of recommendation from teachers or staff at your current school

This scholarship is needs based. Please provide the SAR page from the FAFSA form, the latest year of tax returns, or previous years' financial statements to support financial need.

Terms of Award

- Attendance to all required classes.
- Passing grades in all required courses (a 2.0 grade point average or pass).
- Certificate of completion.
- Grant funds will be paid directly to the school by The Cielo Foundation.
- Grant funds will then be applied to enrolled students who are in good standing.
- Recipients of scholarships will be required to submit attendance records and end of semester grades.
- Contact or interviews with Technical School staff may be used as a mid-term check-in.
- Students will be provided with a warning should either their grades or attendance fall below requirements.
 - Warnings will be provided in the form of a letter to the student and the schools immediately following notification that grades or attendance have fallen below the requirement.
 - Warnings will be escalated to a violation should a semester of grades or attendance be below the requirement.
- If the student violates the requirements of the scholarship, pro-rata funding of the remaining scholarship dollars will not be awarded to the student.

I agree that all the information on this form is correct and answered to the best of my ability. By signing this document, I also agree to complete a short survey each year for four years upon completing my certification.

Applicant Signature

Date

If Applicant is under 18 years of age: I the guardian agree that all the information on this form is correct and give the applicant my permission to apply for this scholarship and consent that the applicant will complete a short survey each year for four years upon completing of certification.

Guardian Signature

Date