February 5, 2015

Dear Friend:

We are currently accepting applications for our 2015 College Awards. These financial awards are granted annually to undergraduate Puerto Rican women selected for their academic excellence and service to the community.

To be eligible, applicants must send a completed College Award Application form to our address listed above, by the deadline date of May 30, 2015 and meet all of the following criteria:

1. Must be currently matriculated as an undergraduate student in an accredited institution of higher education, having earned a minimum of 12 accumulated credits.

2. Must have maintained a minimum GPA of 3.0 with no failing grades.

3. Must demonstrate service to the community.

4. Must provide an official college transcript by the deadline date of June 15, 2015.

5. Must provide two (2) letters of recommendation from a professor, college advisor, employer or supervisor.

6. Must submit a suitable 4" by 6" (minimum size) color photo of the applicant in appropriate professional attire for inclusion in our Commemorative Journal.

7. Must be available to attend a face-to-face interview with the College Award Committee.

The College Award Committee will review only those applications that comply with all of the above seven (7) requirements. The essays of the selected applicants should be written meticulously, and include the applicant’s community service and educational and career goals.

Applications can be downloaded from our website or requested via phone or email. Thank you for your assistance in publicizing this information to as many eligible students as possible, and feel free to make as many copies of the application form as you deem necessary.

Sincerely,

Dara Lustgarten, President
New York League of Puerto Rican Women, Inc.
College Award Application

Part I – Application  Please print or type all information.

____________________________________________________________________________________________________________

Last Name  First Name  Middle Name

Address  Apt.  City  State  Zip Code

Home Tel.  Cell #  Email:

Birth Date: Month__ Day__ Year____  Birth Place: City__________________________State______Country________

Mother’s Birthplace: City__________________________State________Country____________

Father’s Birthplace: City__________________________State________Country____________

Maternal Grandmother’s Birthplace: City__________________________State________Country____________

Maternal Grandfather’s Birthplace: City__________________________State________Country____________

Paternal Grandmother’s Birthplace: City__________________________State________Country____________

Paternal Grandfather’s Birthplace: City__________________________State________Country____________

List chronologically institutions attended regardless of the length of time at each:

College  Major  GPA

Dates Attended  Degree Expected  Expected Date of Graduation

Other

List any partial or full scholarships, honors, fellowships or awards you have received with amounts and dates:

____________________________________________________________________________________________________________

List internships/extracurricular activities/volunteer work/community services in which you have participated.

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

1
New York League of Puerto Rican Women, Inc.
College Award Application

If presently working, attach your resume: Part-Time [ ] Full-time [ ]

Business Name ____________________________________________ Tel. __________________________

Address __________________________ City ______________________ State ____________ Zip Code _____

List names and addresses of the two persons from whom you have requested letters of recommendation: PLEASE PRINT

Name __________________ Address __________________ City __________ State __________ Zip Code ______ Email Address __________

Name __________________ Address __________________ City __________ State __________ Zip Code ______ Email Address __________

Part II – Essay – Print/Type Describe your educational and career goals; explain what this college award means to you and how you will utilize it. You may continue on a separate typed-written page.

________________________________________________________________________

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________________________________________________________________________

I have reviewed the above information, and it is true and complete to the best of my knowledge.

Signature: ____________________________________________________________ Date: ______________________

Send to the address given below: 1) completed application 2) Work Resume 3) College Transcript 4) Two letters of recommendation from a Professor, College Advisor, employer or supervisor, and 5) a picture of yourself for inclusion in our Commemorative Dinner-Dance Journal. The College Award Committee will review only those completed applications that are submitted in compliance with the requirements listed above and below. An eligible candidate 1. must be currently matriculated as an undergraduate student in an accredited institution of higher education, having earned a minimum of 12 accumulated credits. 2. must maintain a minimum CPA of 3.0 with no failing grades. 3) must demonstrate service to the community.

Mail completed application to:
Dara Lustgarten, President
New York League of Puerto Rican Women, Inc.
227 13th Street, Suite B4
Palisades Park, NJ 07650-2066
New York League of Puerto Rican Women, Inc.
College Award Application

Letter of Recommendation

Please Mail To: Dara Lustgarten, President
New York League of Puerto Rican Women, Inc.
227 13th Street, Suite B4
Palisades Park, New Jersey 07650-2066

Print Applicant's Name: ____________________________________________

THIS PART TO BE COMPLETED BY THE RECOMMENDER

Recommender: The person named above is applying for an award that is given annually to undergraduate Puerto Rican women. We would appreciate your impressions of the applicant's intellectual abilities and individual qualities that may distinguish her from her peers. Please comment on this applicant's character and overall promise. If more space is required, please continue on the back of this form. PLEASE PRINT OR TYPE ALL INFORMATION.

________________________________________________________________________
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How long have you known the applicant? What is your relationship to the applicant?

Please rate the applicant in overall promise. (Check one): Below average _________ Average __________________________

Above average _______ Outstanding _________ Exemplary _________ Unable to Rate ________________

Your Position or Title School or Company

________________________________________________________________________

Address City State Zip Code

Telephone #: __________ Signature: __________________________ Date: __________

Print Name: ____________________________ Print Email Address: ____________________________
Letter of Recommendation

Please Mail To: Dara Lustgarten, President
New York League of Puerto Rican Women, Inc.
227 13th Street, Suite B4
Palisades Park, New Jersey 07650-2066

Print Applicant’s Name: ________________________________

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How long have you known the applicant? ____________________
What is your relationship to the applicant? ____________________

Please rate the applicant in overall promise. (Check one): Below average ________ Average ________
Above average ________ Outstanding ________ Exemplary ________ Unable to Rate ________

Your Position or Title ____________________ School or Company ____________________

Address: ____________________ City: ____________________ State: ____________________ Zip Code: ____________________

Telephone #: ____________________ Signature: ____________________ Date: ____________________

Print Name: ____________________ Print Email Address: ____________________