



College Scholarship Program  
Academic Year 2009-2010

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## **David Nakada Endowment Fund**

### Scholarship Terms

Applications received or postmarked on **March 1, 2009** will be eligible for a scholarship to be used towards tuition, books and fees. Students are eligible for the Boys & Girls Club of Hawaii Scholarship as high school seniors planning to attend a University, Community College or Vocational Education Program. Awards will be mailed directly to the college's financial aid office where funds will be disbursed upon verification of enrollment.

### New Applicants

All applications must include the following:

- Completed application form
- Copy of Boys & Girls Club of Hawaii's membership card
- Most recent high school transcript. (Report cards will not be accepted.)
- Verification of 80 completed hours of community service.
- Two (2) Letters of Recommendation
- Personal Statement – Write a statement about yourself addressing the following points in a maximum of 500 words.
  - o Describe someone who has had a significant influence on you and explain how it has influenced you and your life's views.



College Scholarship Program  
Academic Year 2009-2010

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**David Nakada Endowment  
Application for College Scholarship Program  
Academic Year 2009-2010**

**Clubhouse Name:** \_\_\_\_\_ **Membership #:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Alternate phone #:** \_\_\_\_\_ **Gender:**  Male  Female

**Email Address:** \_\_\_\_\_

**Name of High School:** \_\_\_\_\_ **Year of Graduation:** \_\_\_\_\_

**Name of College or Vocational Education program you plan on attending:** \_\_\_\_\_

**Where do you plan on living:**  on campus  off campus  other: \_\_\_\_\_

**Intended major of study:** \_\_\_\_\_

**Will you be registered as a full-time student?**  Yes  No If no, please explain: \_\_\_\_\_

I hereby certify that all the information on this form is true and accurate to the best of my knowledge. I give permission to the Boys & Girls Club of Hawaii to use quotes from any written material submitted to publicize award and clubhouse experiences.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



**Letter of Recommendation**

**This part to be completed by the applicant**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**Applicants Statement:** I understand that the letter of recommendation is to be received and maintained by the Boys & Girls Club of Hawaii. I hereby waive any and all rights I might have of access to this evaluation and understand that the rights I am waiving include, but are not limited to, the right to inspect and review this letter; the right to have a copy of this letter and the right to request and amendment of this letter.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**This part to be completed by the recommender**

- How long have you known the applicant? \_\_\_\_\_ In what capacity? \_\_\_\_\_
- Please comment on the applicant's motivation, maturity, self-confidence, and strength of commitment as it relates to leadership and volunteerism.

3. Among students at a similar level you have known in recent years, how would you rate this student?

	Below Average	Average	Above Average	Outstanding	Exceptional	Unable to assess
Analytical Ability						
Judgment						
Intellectual Ability						
Ability to work with others						
Oral Communication						

Overall rating:  Recommend  Recommend with Reservations  Do not recommend

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name of recommender (please print) \_\_\_\_\_

Position, profession, or occupation \_\_\_\_\_

Email address \_\_\_\_\_ Phone \_\_\_\_\_

Mail to: Boys & Girls Club of Hawaii, Attn: Scholarship Program, 1523 Kalakaua Ave. #202, Honolulu, HI 96826



**Volunteer Hours Verification**

**Student's Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**School Attending:** \_\_\_\_\_ **Graduation Year:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

\*\*\*\* Please use one form per organization.

\*\*\*\* Please include completed form with scholarship applications and mail to: Boys & Girls Club of Hawaii, Attn: Scholarship Program, 1523 Kalakaua Ave. #202, Honolulu, HI 96826

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Name and Address of location at which the student volunteered: \_\_\_\_\_

\_\_\_\_\_

Please check the following boxes

yes  no student was compensated for his/her time

yes  no documentation of student's volunteer hours was made by non-family member

Volunteer start date	Volunteer end date	Volunteer hours completed

Description of volunteer activities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of supervisor: (printed) \_\_\_\_\_

Phone number of supervisor: \_\_\_\_\_

\_\_\_\_\_  
Signature of Supervisor

\_\_\_\_\_  
Date