

## Center for Latino/a and Latin American Studies Fall 2018 – Winter 2019 Scholarship Application

Last Name:	First Name:	M.I.:
Home Address:		
City:	Stat	ate: Zip:
Home Phone:	Cell Phone:	
WSU Banner ID#:	WSU Access I	ID#:
FAFSA Application Submiss	sion Date:	
WSU/HS Cumulative GPA:	WSU/HS Last Se	Semester GPA:
Major(s):	Minor (s):	
Expected Date of Graduatic	on:	
Center scholarship(s) for wh	nich you are applying (check all t	that apply):
Summer Enrichmen	t / CBS Scholars C2C Pro	rogram
Research Fellow	Minor D	Degree Support
Cindy Estrada Labo	r/Social Justice Other	
Term(s) for which you are a	pplying (check all that apply):	
Fall 2018	Winter 2019	Spring/Summer 2019
I understand that the eligibil standing at WSU.	ity for LAS scholarship support is	is dependent on being enrolled and in good
I also understand that the n	• • •	nount of available funds will determine the levels awarded a scholarship due to funding limitations.
The award will be administed financial need of individual states		ons governing scholarship awards and total
	contained in my application is transme for publicity purposes if I am	true. By signing below, I give WSU and LAS m awarded.
Applicant Signature	I	Date