



# Scholarship Application

Chaminade University Scholarships are funded by various community groups that share Chaminade's commitment to the pursuit of excellence. The University Scholarship program is designed to encourage outstanding academic performance and community service. These scholarships are awarded to day undergraduate students who are enrolled full-time (12 credits each semester), PACE undergraduate students who are enrolled full-time (9 credits each term) and graduate students who are enrolled full-time (6 credits each term).

## Eligibility Requirements

To be considered for a Chaminade University Scholarship, an applicant must:

1. Be a citizen of the United States.
2. Be accepted for enrollment in a Chaminade University undergraduate or graduate degree program.
3. Have demonstrated academic achievement (i.e., high school GPA or college cumulative GPA of at least 2.50 for undergraduate applicants; 3.50 cumulative GPA for graduate applicants).
4. Have performed service to the community or have demonstrated leadership.

## Application Procedures

A complete application for scholarship must contain:

1. A Chaminade University Scholarship Application.
2. One (1) **current** letter of recommendation.
3. Complete the Free Application for Federal Student Aid (FAFSA) and submit the results (Student Aid Report-SAR) to the Financial Aid Office.
4. **A typed essay** to describe your educational and career goals and how a Chaminade University scholarship would help you achieve these goals.
5. Submit all the above material to:

**Chaminade University Scholarship Committee**  
**c/o Financial Aid Office**  
**Chaminade University of Honolulu**  
**3140 Waialae Avenue**  
**Honolulu, HI 96816-1578**

## Deadline

The Chaminade University Scholarship Application, the SAR, one (1) letter of recommendation, and essay must be in the Financial Aid Office by MARCH 1 for priority consideration for academic year/fall awards. Applications for the spring awards are due by OCTOBER 1 (subject to availability of funds). Applications with missing documents will not be reviewed during the initial deliberations.

## Notification of Awards

Students who are selected for scholarships will be notified by mail.



## Applicant Information

Applying for: Academic Year 20\_\_ - 20\_\_

Name: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

Maiden Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Perm. Address: \_\_\_\_\_ CUH Email: \_\_\_\_\_

Perm. City, State, Zip: \_\_\_\_\_ Home Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_

Mailing City, State, Zip: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ State of Residency: \_\_\_\_\_

Ethnicity: \_\_\_\_\_ U.S. Citizen? \_\_\_\_\_

Religion: \_\_\_\_\_ If no, what country? \_\_\_\_\_

(Certain scholarships are based on a person's ethnic background and religion. Providing this information is optional.)

Upcoming Year at Chaminade:       Freshman       Sophomore       Junior       Senior       Graduate

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

City and State of HS \_\_\_\_\_ GPA \_\_\_\_\_

If GED, year obtained \_\_\_\_\_ Class Rank \_\_\_\_\_

(Continued on next page.)

List all **high school** activities participated in and date. Please include the offices held, community activities, awards/honors received, athletics, and employment.

School Activities	Date

Community Activities	Date

Awards and Honors	Date

Employment	Date

### For Returning and Transfer Students Only

Year of Last Scholarship \_\_\_\_\_ Continuing CUH GPA \_\_\_\_\_ Major Field of Study \_\_\_\_\_

Names of Scholarships: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### Previous Colleges or Universities Attended

Name	City & State	Dates Attended	Credits Earned	GPA

List all **Chaminade University/college activities** participated in and dates. Please list offices held, community activities, awards/honors received, athletics, and employment.

School Activities	Date

Community Activities	Date

Awards and Honors	Date

Employment	Date

\_\_\_\_\_ By initialing this box, I allow Chaminade University and persons acting on its behalf to release pertinent educational information to third parties who hold a legitimate educational interest in those records.

### Certification

All of the information contained in this application is true and complete to the best of my knowledge.

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



**Chaminade**  
**University**  
OF HONOLULU

### Scholarship Application Form Supplementary Questions

*Answering these supplementary questions is purely voluntary. These answers are confidential. Please answer to the best of your knowledge. If you have any questions, please contact Financial Aid at (808)735-4780, or [finaid@chaminade.edu](mailto:finaid@chaminade.edu).*

1. Are you of Portuguese descent?

Yes       No

2. Are you employed by, have been employed by, or are related to an employee of a law enforcement agency (such as Honolulu Police Dept.)?

Yes       No

If Yes, please explain:

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*For questions 3-5, military branches include Army, Navy, Air Force, Marines, Coast Guard, and National Guard.*

3. Are you an active-duty military person?

Yes       No

If Yes, please identify branch: \_\_\_\_\_

4. Are you a veteran no more than 10 (ten) years from your original separation date?

Yes       No

If Yes, branch \_\_\_\_\_

and separation date: \_\_\_\_\_

5. Are you a child or step-child of a veteran?

Yes       No

If Yes, please identify branch: \_\_\_\_\_

*Thank You!*