

# **OCA SAN MATEO COUNTY CHAPTER 2025 SCHOLARSHIP APPLICATION**

February 2025

Applicants must meet the following criteria:

- Identify as Asian Pacific American;
- Current resident of San Mateo County;
- Intend to enroll in a college or university in the Fall 2025;
- Attend the in-person Scholarship Awards Ceremony on **Saturday, May 17, 2025, from 12-2pm in San Mateo/Foster City** (exact location to be shared with applicants)

If any of these above conditions are not met, or if any part of the application is incomplete or any required documents are not submitted by the deadline (received via email by 11:59pm, Tuesday, April 15), the application will be disqualified. Applicants not attending college in Fall 2025 will also be disqualified and the award will be withdrawn. Applicants will be notified of their award status via email no later than 11:59pm, Tuesday, May 7th.

The following criteria will be utilized in selecting the successful applicants:

- Financial need;
- Community service and volunteerism;
- Leadership and creativity;
- Academics

While financial need is a key consideration for the scholarships, other criteria such as community service and academic achievement will also be considered. Most of our successful applicants are among the top students in their class based on essays as well as grades and community service.

Applicants need to complete only one application to compete for all scholarships in our program.

Please email [scholarship@ocasanmateo.org](mailto:scholarship@ocasanmateo.org), attention: Scholarship Committee, with your completed application. Please see [www.ocasanmateo.org/scholarship](http://www.ocasanmateo.org/scholarship) for more information.

## OCA San Mateo 2025 Scholarship Instructions

**APPLICANT:** Please complete and email Sections I & II in **pdf format** to the email below, and have your high school counselor complete and email Section III and a copy of your official transcript to the email address below. All applications must be received by email no later than 11:59pm, **Tuesday, April 15**. Your counselor must also attach a copy of your official transcript. **Late or incomplete applications will not be accepted and will be automatically disqualified.**

We anticipate notifying applicants of the status of their applications no later than **Tuesday, May 7th**, to the email address provided on the application. Applicants not accepting their awards within 5 calendar days of notification by e-mail will be disqualified.

**COUNSELOR:** Please send the following to the email address below:

- 1) Copy of the applicant's official transcript;
- 2) Section III with applicable parts completed.

Thank you.

Email applications to:

**[scholarship@ocasanmateo.org](mailto:scholarship@ocasanmateo.org)**

**SUBJECT: Scholarship Application for (Name)**

## SECTION I

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

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail \_\_\_\_\_ Age \_\_\_\_\_

High School \_\_\_\_\_ Grade Level \_\_\_\_\_

Intended Occupation or Area of Study

\_\_\_\_\_

Intended College Choice \_\_\_\_\_

Father's (or Guardian) Full Name:

\_\_\_\_\_

Home Address:

\_\_\_\_\_

Father's Occupation: \_\_\_\_\_ Company: \_\_\_\_\_ Title: \_\_\_\_\_

Mother's (or Guardian) Full Name:

\_\_\_\_\_

Home Address:

\_\_\_\_\_

Mother's Occupation: \_\_\_\_\_ Company: \_\_\_\_\_ Title: \_\_\_\_\_

Gross Annual Household Income: (Proof may be requested)

\_\_\_\_ Less than \$45,000    \_\_\_\_ \$45,000 – 80,000    \_\_\_\_ \$80,000-\$120,000

\_\_\_\_ \$120,000-\$160,000    \_\_\_\_ Over \$160,000

Family

Siblings: Number \_\_\_\_\_ Ages: \_\_\_\_\_

## SECTION II

### I. Essays

Each essay should not exceed 500 words, and each page must include: (1) your full name; (2) essay title; and (3) page numbers if needed. Please answer the following question on a separate piece of paper.

1. As a member of the Asian American community, what are some of the issues in this country that are personally or educationally/professionally relevant to you and how are these related to or impact your future (personal, educational, professional) planning?
2. What field of interest are you contemplating to enter upon college graduation and how did you come to choose this area of interest? Please share any personal story or experience that led you to pursue this area of interest.

### II. Other Activities

Please list the following (use attachments as necessary):

EXTRACURRICULAR SCHOOL ACTIVITIES (including any offices held):

COMMUNITY SERVICE:

<u>Organization</u>	<u>Hours Per Week</u>	<u>Total Hours</u>	<u>Dates of Service</u>
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AWARDS:

WORK EXPERIENCE:

<u>Employer</u>	<u>Job Description</u>	<u>Length of Employment</u>	<u>Hours/week</u>
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OTHER INTERESTS, HOBBIES and TALENTS (please list and describe):

UNUSUAL CIRCUMSTANCES (Optional): Report any unusual circumstances (including financial need or SAT/ACT scores, if available, that might enhance a lower GPA) that have affected your school activities, work experience, or achievement in school.

I, \_\_\_\_\_, hereby certify the information contained in this application is correct to the best of my knowledge and that the essays are my own work. I understand that all information is subject to verification.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION III**  
**For Counselor Completion**

**Applicant Name:**

\_\_\_\_\_

**To the Counselor:** Please: (1) attach a copy of the applicant's transcript; (2) complete the sections below if applicable; (3) email this Section III and the transcript to:

scholarship@ocasanmateo.org; SUBJECT: Scholarship Application for (applicant name.)  
Thank you.

I, \_\_\_\_\_, hereby certify that the above applicant currently has a GPA of \_\_\_\_\_ on a \_\_\_\_\_ point scale and a **weighted GPA** of \_\_\_\_\_ on a \_\_\_\_\_ point scale.

If the school uses student ranking, the applicant is ranked \_\_\_\_\_ out of a class of \_\_\_\_\_ and has a combined (Critical Reading/Math/Writing) SAT/ACT score of \_\_\_\_\_ (if available). The applicant is of good academic standing, and will graduate with the senior class on \_\_\_\_\_ Date.

\_\_\_\_\_

Name of Counselor

Date \_\_\_\_\_

School: \_\_\_\_\_

Phone number and extension at school:

\_\_\_\_\_

Counselor's school email address:

\_\_\_\_\_