

Hanmi Bank Dream Scholarship For At-Risk Students

2022 Scholarship Application

For more information regarding the scholarship application process and detailed information, please contact Estée Song of Korean American Family Services (KFAM) at HDS@kfamla.org or at 707-714-0047

Hanmi Dream Scholarship is offered by Hanmi Bank to provide educational support to the atrisk youths to achieve their educational goals. The scholarship is largely focused on supporting foster youths and youths from home of domestic violence, but is available for other at-risk youths.

APPLICATION REQUIREMENT & ELIGIBILITY:

- 1. Either a social worker, case manager or a guardian may complete the application on behalf of the student, if a student is not able to complete the application.
- 2. Students currently attending elementary school (K-6), middle school, high school, college, trade school and/or graduate school are eligible to apply. Students must be between five (5) to twenty six (26) years of age in order to be eligible. School attendance verification will be required.
- 3. Applicant should either be currently or formerly been in a 1) foster care program, or 2) family exposed to domestic violence. If the applicant is faced with a different risk, please describe the risk (ex. Homelessness). Verification will be required.
- 4. Applicant must demonstrate 1) financial need, 2) how they plan to use the award.
- 5. Application should include a statement of recommendation. Personal statement is also required for students who are applying for or currently attending trade school, college or graduate school.

SCHOLARSHIPS OFFERED:

Hanmi Dream Scholarship will award scholarships ranging from \$1,000 to \$10,000 to qualified students depending on the school grade level and the financial need. Scholarship program will be administered by Korean American Family Services (KFAM). Scholarship funds will be given to Korean American Family Services (KFAM), who will be responsible for administering the Hanmi Dream Scholarship for At-Risk Youth program, which includes application acceptance and review, nominating the awardees, distributions of the award and monitoring the awards.

SCHOLARSHIP DEADLINE:

AWARD NOTIFICATION & PROCESS:

- 1. Award recipients will be notified by July 15, 2022. Applicants will be notified if there are changes to the notification date. If the applicant is 18 years or older, notification will be sent to the applicant's email address listed in the application. If the applicant is a minor, notification will be sent to the person filling out the application (i.e. social worker, case manager, and guardian) on behalf of the applicant.
- 2. The awarded scholarship fund can be used for after school programs, tutoring, school supplies, or any academic needs. If you have an item such as a computer, laptop, or any school supplies that you would need help purchasing, please contact HDS@kfamla.org
- 3. In order to receive the awarded scholarship fund, you will need to submit all receipts by February 28, 2023
- 4. Any unused or unclaimed scholarship funds will be returned to the original trust.

Hanmi Dream Scholarship Application

SECTION ONE

This part can be completed by student, guardian and/or CSW/Case Manager

I. STUDENT INFORMATION

Legal Name in Full:				
(Print/Type)	Last	First	Middle	
Address:	Street Address, Apt Number (If address is confidential, use administrative office)			
	City	State	Zip	
	()	otate	p	
	Home Or Mobile	Ethnicity	Gender	
	Date of Birth (Month/Date/Year)	E-mail Address		
Name of CSW/	Case Manager:	Organization:		
	Phone	E-mail Address		
	pelow if student is currently attending college, Trade School, or Gradu	Elementary, Middle or High School. Juste School, please fill in the next section	on.	
For		/ \		
Elementary, Middle, High School Students:	Current School Name	School Phone Number	Current Gra	
	Current School Street Address			
	City	State	Zip	
	Are you a graduating high school senior planning to enter college/trade school?			
	Yes (If yes, please attach high school transcript) Enter the name of the College or Trade school you plan to attend			
	(Please attached accepta	nce letter or enrollment letter)		

II. SCHOOL INFORMATION (CON'T)

or College,		()	
rade School, r Graduate chool	Name of Institution	Phone Number	
Students:	Major	Current Grade Level	
	School Street Address		
	City	State	Zip
	*PLEASE ATTACH A COPY O	F AN ENROLLMENT VERIFICATION	
PERSONAL	STATEMENT		
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IV. FINANCIAL NEED

Verification

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Please	identify how the	scholarship award will be used.	
		After school tutoring or tuition (K-12)	
		College tuition (trade school, college, §	graduate school)
		School related supplies (Please describ	pe below)
		Other (Please describe below)	
ACKN	IOWLEDGEME	ENT AND SIGNATURE	
	review the respond review the responding the results of the result	nses on the scholarship application and ag gning below:	gree to the following
1.	My signature co	nfirms that all information provided on th	is application is accurate and truthful.
2.		at this application will be made available to ssing the scholarship award.	o those qualified to review for the sole
3.	photographed for	above the age 18 years old, the scholarsh or public relations purpose. Students unde or public relations purpose unless the stud	er 18 years old will not be asked to be
Stude	ent (Applicant Sigr	nature if over 18 years or older)	Date
Commit the spe reduce	ttee reserves the rig cified purpose (ex. s payments. Awarder should contain infor	rovided on this application is deemed inaccura ght to rescind the application. Should the appl Student stops receiving tutoring), the Commit- es will be required to submit a final report oncommation including how the award was used an	icant no longer need the scholarship for tee reserves the right to suspend or te they have used the award. The final

SECTION TWO

This part of the application is completed by CSW/ Case Manager

I. AT-RISK YOUTH VERIFICATION

e of the ent			
t/Type)	Last	First	DOB
	nagers: Please complete the following section equested information following the check box Applicant is a current or former foster yout	(:	
	Applicant is a current or former domestic vi	olence expos	ed youth
	Applicant is an Other At-Risk Youth		
For Fo	oster Youth: Fill this section if applicant is a fo	oster youth	
	Case Number	Social W	orker's Name
	Social Worker's E-mail Address	Social W	orker's Telephone Number
	Attorney's Name & E-mail Address	Attorne	y's Telephone Number
For D	V Exposed Youth: Fill this section if applicant Case Number (either parent's or student's case		posed to DV DV Shelter Name (if applicable
		()
	Case Manager's Name & E-mail Address	Ca	ase Manager's Telephone number
	Attorney's Name & E-mail Address (if applicable)	At	torney's Telephone number
<u>Othe</u>	r At-Risk Youth: Fill this section if applicant is	faced with a	different risk
Descr	ibe the risk:		
		()	
	Case Manager's Name	Case M	anager's Telephone number

II. STATEMENT OF RECOMMENDATION

ACKNOWLEDGEMENT AND SIGNATURE	
ease review the responses on the scholarship application and agr	ree to the following
knowledgement by signing below:	s application is accurate and truthful.
 My signature confirms that all information provided on this I understand that this application will be made available to purpose of assessing the scholarship award. 	those qualified to review for the sole
 My signature confirms that all information provided on this I understand that this application will be made available to 	those qualified to review for the sole

fail to submit a final report or follow these conditions will not be eligible for future Hanmi Dream Scholarships.