

LOS ANGELES CHAPTER OF SOUTHERN CALIFORNIA
MEXICAN AMERICAN GOLF ASSOCIATION

2025 Scholarship Application

Eligibility Requirements

- Be related to a person who is a member of the Los Angeles Chapter of the Southern California Mexican American Golf Association (LA SC MAGA).
- Graduate from High school by June 2025 and be enrolled as a college freshman by the fall semester of 2025 or in a four-year accredited undergraduate college or university, community college, trade or technical school, police or fire academy.
- Scholarship(s) will be awarded based on the information submitted by the applicant on the application form.

Application Instructions

1. Complete the Scholarship Application Form located at scmagalosangeles.com
2. **Return completed scholarship application no later than 5/5/25**, by mail or email to:

Attn: Byron Morales
1605 Victoria Place
La Verne, CA 91750
Phone (951) 316-1713
Email: byronmorales@gmail.com

Los Angeles Chapter of Southern California Mexican American Golf Association
SCHOLARSHIP APPLICATION

APPLICANT INFORMATION

Name:

Date of birth:

Age:

Phone:

Current address:

City:

State:

ZIP Code:

Email Address:

ACADEMIC INFORMATION

Current High School:

Graduation Date:

City:

How long?

Previous High School Attended if Any:

City:

How Long?

College, University, Community College, Trade or Technical School You Will Attend in Fall of 2023.

Name:

Address:

City:

State:

ZIP Code:

Grade Point Average (GPA) Senior Year:

Grade Point Average (GPA) Entire High School Career:
(Winner(s) will be asked to submit a copy of their high school transcript).

EXTRA CURRICULAR ACTIVITIES

In What Student Activities Did You Participate During Your High School Attendance?

List Any Positions Held in Any Organization and Academic and/or Athletic Honors You Have Received

COMMUNITY SERVICE

List Any Community Service Organizations or Projects in Which You Have Participated During High School.

Los Angeles Chapter of Southern California Mexican American Golf Association
SCHOLARSHIP APPLICATION

WORK EXPERIENCE

List Any Work Experience You Have Had:

Current employer:

Employer address:

Dates Employed:

Phone:

E-mail:

City:

State:

Hours Per Week

Position:

Previous employer:

Address:

Dates Employed

Phone:

E-mail:

City:

State:

Hours Per Week

Position:

Previous employer:

Address:

Dates Employed

Phone:

E-mail:

City:

State:

Hours Per Week

Position:

LA SC MAGA SPONSOR

Name of LA SC MAGA Member Sponsoring You:

Relationship to Member: Child, Grandchild, Sibling, Nephew, Niece, Cousin

Other (Specify):

AREA OF COLLEGE STUDY

Please Indicate What Major or Area of Study You Plan to Pursue (e.g. Liberal Arts, Music, Fireman etc.) and Why You Have Chosen This Field. Use Additional Sheets if Necessary.

PERSONAL STATEMENT

Please Provide a Statement of Why You Feel That You should Receive This Scholarship.

