



**The Isabel Blanco Ramirez Community Service Award Application**

**BAHIA Inc.**

**Summer 2019**

**July 1st - Aug 16th**

Name of Applicant: \_\_\_\_\_ DOB: \_\_\_\_\_

Home Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Alternate Contact's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Alternate Contact's Email: \_\_\_\_\_

**Program(s) Participated in: (Check all that apply)**

- |   |                       |
|---|-----------------------|
| <input type="checkbox"/> Centro VIDA              | Years Attended: _____ |
| <input type="checkbox"/> Bahia School Age Program | Years Attended: _____ |
| <input type="checkbox"/> La Academia de Bahia     | Years Attended: _____ |
| <input type="checkbox"/> La Academia de VIDA      | Years Attended: _____ |

School Currently Attending: \_\_\_\_\_ Grade Level: \_\_\_\_\_

**Work and volunteer experience: (Start with most recent one)**

Employer	Position	Duties	Dates of volunteering/ employment

**Please submit this application with the rest of your application materials.**

I hereby certify that all information contained in this document to be true and accurate.  
 I also agree that if chosen as a recipient of the scholarship I will commit to 30 hours per week for 7 weeks to be completed during the summer. I understand that when applying I will be willing to intern at Bahia School Age Program for the period of July 1st through August 16th

\_\_\_\_\_  
 Applicant's Signature

\_\_\_\_\_  
 Date Signed