

# LAS VEGAS HAWAIIAN CIVIC CLUB

## Educational Stipend Award 2025

### APPLICANT INFORMATION

Name:		
Address:	City:	State:
Email Address:		
Cell Phone:	Use (See Item F next Page):	Age:
Name of Intended Award Use Organization:		
Address:		
City:	State:	ZIP Code:
Phone:	E-mail:	

### EMERGENCY CONTACT

Name of a relative not residing with you:		
Address:		Phone:
City:	State:	ZIP Code:

### REFERENCES OF ORGANIZATIONS OR PERSONAL CONTACTS

Name	Address	Phone
Name	Address	Phone
Name	Address	Phone

### SIGNATURES

I authorize the use of my name and picture if chosen for the Las Vegas Hawaiian Civic Club Educational Stipend for publications. I have received a copy of this application.	
Print Name:	Date:
Signature:	

Notes:

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**LVHCC APPLICATION OPEN DATE: June 1, 2025**  
**LVHCC APPLICATION DEADLINE DATE: August 24, 2025**

**Mail to: LVHCC EDUCATION STIPEND/SCHOLARSHIP COMMITTEE**  
**7260 West Azure Drive Suite 140-1052 Las Vegas, NV 89130**

**FORM REQUIREMENTS AND CHECKLIST**

\_\_\_\_\_ **First time applying**

\_\_\_\_\_ **Re-applying**

\_\_\_\_\_ A. It is the responsibility of the Applicant to complete the entire Packet, including this completed checklist, which **MUST** be received by the Scholarship Committee no later than **August 24, 2025** to be considered for the LVHCC Educational Stipend Award. The address is provided at the end of these requirements.

\_\_\_\_\_ B. Please ensure that all copies are legible.

\_\_\_\_\_ C. Prepare a resume of your educational and employment histories as well as church, organizations, and community activities.

\_\_\_\_\_ D. The Educational Stipend Award Recommendation Form is included with this application. Three recommendation letters, or use of the attached Educational Stipend Award recommendation form, are required and must be submitted with the application package. Each recommender should be familiar with your academic achievement, your moral character, your employment experiences, and your organizational and community activities. The recommenders **shall not be relatives, family members or students**, but may include school personnel, teachers, administrators, and employers. You may also include one recommendation from a member of the Las Vegas Hawaiian Civic Club.

1. Complete Section 1 of the Educational Stipend Award Recommendation Form **before** giving the form to the three individuals from whom you are requesting recommendations.

2. The forms must be filled-in completely, dated, signed and sealed by the recommender. To preserve confidentiality each recommender should give the form and/or the recommendation letter in a sealed envelope, directly to the scholarship applicant.

3. All **three recommendations** must be included in the Educational Stipend Award Application Packet when it is sent to the Committee. It is the Applicant's responsibility to get the recommendations from the recommenders.

\_\_\_\_\_ E. **The Completed Packet should contain the following items:**

1. Application

2. Resume

3. One page Essay on 1) your area of study or what you plan to study while in school and 2) how will this area of study impact your career choice?

4. Three Sealed Envelopes containing completed Scholarship Recommendations that the applicant has personally received from the persons writing the recommendation.

5. An acceptance letter from your Trade and or Workshop coordinator.

This Educational Stipend Award Application Packet **MUST BE POSTMARKED ON OR BEFORE August 24, 2025.**

We **suggest** this packet be sent with a confirmation return that can track your stipend award application to ensure it arrives on time.

\_\_\_\_\_ F. **What can this Educational Stipend be used for:**

Stipend can be used for Workshops, Vocational Training, Trade/Technical School, specific test application fees.

An acceptance letter from your education institutional must be provided as proof of sign up or if applicant has already paid for education please provide Approval letter and form of payment received.

\_\_\_\_\_ G. **How will my Stipend be distributed and when?**

Stipend will be mailed directly to your educational institute (you are responsible for providing an address for LVHCC to mail the Stipend to the educational institute). If the applicant has already paid their tuition, a proof of receipt from your educational institution will be required in order for your Stipend to be made payable to you. Your Stipend **MUST** be used within one year from the date of award letter. Failure, to use your Stipend will cause a forfeiture of funds.

\_\_\_\_\_ H. **Eligibility**

Applicant must be over the age of 18 years old,

Applicant must be a member of the Las Vegas Hawaiian Civic Club, OR

Applicant has a family member who is a current member of the Las Vegas Hawaiian Civic Club

**PLEASE SUBMIT ONLY THE REQUESTED DOCUMENTS.** Do NOT include copies of awards, membership cards, newspaper articles, etc. **Reminder: Accuracy and neatness count!** You are competing for a limited number of awards. Put your best effort forward. Proofread and review your completed application before submitting it to the Committee.

Any questions can be directed to the Las Vegas Hawaiian Civic Club Scholarship Committee at [lasvegashcc@gmail.com](mailto:lasvegashcc@gmail.com). You will be notified as to the disposition of your application. If your application is approved, the awarded monies will be sent directly to the college/vocational/workshop school after award of the stipend certificate.

**(Optional Form to be Used if Recommender does not Use a Letter Format)**

Name of Applicant	City	State	Zip
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*This applicant desires a stipend award for the purpose of continuing studies at:*

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*Name of Trade/Workshop/College*

Please provide a recommendation focused on your knowledge of the applicant's character and reputation regarding leadership skills, dependability, etc. All information will be held confidential. Please feel free to use the back of this form for additional information, if needed. **Why would you recommend this applicant for an Educational Stipend Award?**

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**Title/Relationship to Applicant:** \_\_\_\_\_

\_\_\_\_\_  
Full Name (Please Print)

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Work Number

Street Address	City	State	Zip
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