

SCHOLARSHIP APPLICATION (SEPTEMBER 20 – NOVEMBER 20, 2025)		
<i>ABIGAIL KAWĀNANAKOA KUPUNA KAKO 'O FUND</i> <i>AMOUNT: \$1000.00</i>		
APPLICANT INFORMATION		
Name:		
Date of birth: ____/____/____	Primary Phone:	Lvhcc Member Yes No
Current address:		
City:	State:	ZIP Code:
Email:		
EMERGENCY CONTACT INFORMATION		
Name:		Phone:
Address:		
Relationship:		
Name:		Phone:
Address:		
Relationship:		
HOBBIES / INTERESTS (E.G., HULA, 'UKULELE, 'ŌLELO HAWAI'I, LEI MAKING)		
REFERENCES (NON-RELATIVE)		
Name:		Phone:
Address:		
Relationship:		
Name:		Phone:
Address:		
Relationship:		
SCHOLARSHIP TO ENHANCE THE QUALITY OF LIFE FOR OUR KUPUNA (SENIOR CITIZENS)		
SIGNATURE		
Sign application and return to address indicated on the checklist; for questions contact the LVHCC Scholarship Committee at 702-907-3667 or lasvegashcc@gmail.com		
Signature of applicant:		Date:

NOTE: The information processed on this application form will be kept for the private use of LVHCC and will not be released or sold for any other purpose.

LVHCC APPLICATION OPEN DATE: September 20, 2025
LVHCC APPLICATION DEADLINE DATE: NOVEMBER 20, 2025
LVHCC Award Date: December 2025 (actual date pending)

Mail to: Las Vegas Hawaiian Civic Club
ATTN: SCHOLARSHIP COMMITTEE
7260 West Azure Drive Suite 140-1052 Las Vegas, NV 89130

FORM REQUIREMENTS AND CHECKLIST

- _____ A. It is the responsibility of the Applicant to complete the entire Packet, which **MUST** be received by the Scholarship Committee no later than **November 20, 2025** to be considered for the LVHCC Kupuna Kako'o Fund.
- _____ B. Please ensure that all documents and/or copies attached are legible.
- _____ C. **The Completed Packet should contain the following items:**
 - 1. Application
 - 2. Essay (100-150 Words minimum) How can we help?
 - 3. Copy of Current Nevada Driver's License or Government Identification
 - 4. Copy of Birth Certificate to identify if of Native Hawaiian ancestry (preferred)—this is not restrictive & all are welcome to apply.

NOTE: The application will remain with the LVHCC Scholarship Committee until judging is completed then documents will be destroyed and applicants notified.

This Kupuna Kako'o Fund Packet **MUST BE POSTMARKED ON OR BEFORE November 20, 2025**.

LVHCC Komike will inform/notify the applicant upon receipt of their packet.

- _____ D. **What can this Kupuna Kako'o Fund be used for:**
 - Senior Adult Day Care Services
 - Senior Medical Care and/or Expenses
 - Senior Pharmacy Expenses
 - Senior Doctor Appointments Fees and Costs
 - Senior Travel & Transportation Expenses
 - Senior Food Costs and/or Meals
 - Senior Housing Costs (Rent, Mortgage, etc.)
 - Senior Household Items (Cleaning, Maintenance, Toiletries, etc.)
 - Senior Tax Preparation and/or Tax Bills
 - Senior Apparel (Clothing, Shoes, etc.)
 - Senior Furniture
 - Senior Medical Equipment
 - Senior services (support to conduct performances, cultural events, etc.)

_____ E. **Eligibility (must be....)**

A LVHCC Member and / or Resident of Clark County, Nevada

Age 60 years old or older

Native Hawaiian Ancestry (Preferred) to the extent permitted by law but this is not a restrictive measure or deciding application requirement (open to all to apply)

How will the Kako'o Fund amount will be distributed and when?

The award of the Abigail Kawānanakoa Kupuna Kako'o Fund will occur at either an LVHCC event in December or in-person by an LVHCC designated representative at Awardee's home. Your Award **MUST** be used within 6 months from the date of presentation. Failure to use your Award within the 6 month period will cause a forfeiture of funds.

PLEASE SUBMIT ONLY THE REQUESTED DOCUMENTS

- **Reminder: Accuracy and neatness count! You are competing for a limited number of awards. Proofread and review your completed application before submitting it to the Committee.**

Any questions related to this application, or the Kupuna Kako'o Fund can be directed to the Las Vegas Hawaiian Civic Club Scholarship Committee at lasvegashcc@gmail.com.

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