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ANDREA DE MICHELI, BOARD MEMBER

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REACH FOR THE STARS FOUNDATION

## Loretta Harper Reach for the Stars

### Scholarship Application

#### Nevada State Education Association Reach for the Stars Foundation

Applicant must be a graduate or a graduating senior from a Nevada Public High School.

If applying for the Desert Pines Category, you must be a graduating senior from Desert Pines High School in Las Vegas, NV

NSEA has two (2) scholarships in the amount of \$500 each

**One (1) to a Desert Pines High School graduating senior and One (1) to a DACA Dreamer in memory of Mrs. Loretta Harper, Counselor**

Please **circle** the category for which you are applying:

**Categories**      : DREAMERS                                      DESERT PINES HS

Application Instructions: Please complete the application in full by providing all requested information. Supporting documentation and applications submitted for this scholarship will not be returned. All applications and documents will not be shared outside of the NSEA Scholarship Committee. Applicants must attach the following information to the application:

1. Official High School Transcript – MUST be a graduating Senior from Desert Pines HS for the Desert Pines HS scholarship.
2. Official letter of acceptance or proof of enrollment to the licensed or accredited Nevada education institution providing the post-secondary education or training.
3. A typed essay: See following page for requirements.
4. A typed resume that should not exceed 2 pages.
5. Two (2) letters of recommendation.
6. A pdf copy of the scholarship application is located at [www.nsea-nv.org](http://www.nsea-nv.org)

**DACA Dreamer Applicants you MUST be currently enrolled in the DACA program**

**Please type or print clearly**

Name of Applicant: \_\_\_\_\_  
Last                                      First                                      M.I.

High School: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_                                      \_\_\_\_\_                                      \_\_\_\_\_  
City                                      State                                      Zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Parent or Guardian \_\_\_\_\_  
(If under 18 yrs. of age)

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