This is a common referral form for both the Lunalilo Scholars Program and the Kapo‘oloku Tuition Waiver Program. Every common application must be accompanied by a referral. Examples of a Referrer are Teachers, Counselors, coaches, social workers, advocated, pastors or mentors. Applications without a referral are considered incomplete and will not be reviewed. Every complete application will be reviewed and considered for the scholarship and program that best fits the student’s needs.

For help in completing this form, or for more information about this project, you can contact us by email at lunalilo@hawaii.edu, or if you would like to speak to someone you can contact either, LaVache Scanlan, Director of the Lunalilo Scholars Program at (808) 734-9371 or Michaelyn Nakoa, Coordinator of the Kapo‘oloku Program at (808) 734-9714.

Note to Referrer
To be considered, the applicant must have a completed referral form. By submitting the following referral, you are helping our committee determine the applicant’s eligibility for the program. Thank you for taking the time to complete this referral form on the applicant’s behalf.

Applicants must be O‘ahu residents and have a high school diploma or will complete a GED by August 2016 to submit an application. Students accepted into the program must be a state resident as determined by the University of Hawai‘i System Application Form and be enrolled at Kapi‘olani Community College for the 2016 – 2017 academic year. Applicants DO NOT need to apply to Kapi‘olani Community College before being accepted into the program.

If accepted into the program, recipients must be able to attend a mandatory orientation in June (TBA) and a 10-day Summer Bridge Program at Kapi‘olani Community College from August 1 – August 12, 2016 (8–4 daily). Failure to complete requirements will deem the applicant ineligible and affect future awards.

To submit an online referral form or to print a referral form, go to:
http://fye.kapiolani.hawaii.edu/lunalilo-scholars-2/ OR
https://www.kapiolani.hawaii.edu/campus-life/student-services/kapooloku-program/

Deadline
Online referral forms can be submitted until **11:59pm on May 30, 2016**. Paper referral forms must be postmarked by **May 30, 2016** to be considered.

If the referral is submitted after the deadline, the applicant may be considered for the wait list. Applications submitted without referral forms will NOT be considered.

Applicants will be notified of the status of their application by June 30, 2016.

Mail this form to:
Kapi‘olani Community College
c/o LaVache Scanlan
4303 Diamond Head Road, ‘Ilima 205
Honolulu, HI 96816
Referral Form
All questions are required. There are no right or wrong answers to the questions, so please answer them truthfully and to the best of your ability.

*Please print legibly

Applicant Information

Name of Applicant: ____________________________________________________________
  Last, First, Middle

Previous Names Used by the Applicant (Maiden name, etc.): ______________________

Referrer Information

Name of Referrer: _____________________________________________________________
  Last, First, Middle

Affiliate Organization: _________________________________________________________

Contact Phone Number: ________________________________

Email: ________________________________________________________________

Relationship to the applicant (counselor, pastor, teacher, etc.):
---------------------------------------------------------------

How long have you known the applicant? ___________________________

Check all of the following that apply to the applicant:

☐ Previously attended a college or university.
☐ Applied to Kapi‘olani Community College
☐ Applied to other colleges or universities.
☐ None of the above.
☐ Other ________________________________
Questions About Applicant’s Potential and Need for the Program:

Please answer the following questions to the best of your ability. Both programs are geared for students with life challenges that make it difficult to attend college. Therefore, the information we are trying to acquire about the applicant is not what would typically be found in letters of recommendation for other scholarships. It is also information that sometimes the applicant may have difficulty sharing or may not think to share.

The referral form is heavily weighted in our review process and the answers to these questions help us to better understand the applicant’s needs. It will also help us determine which program will best fit the applicant. You may write in the space provided and/or attach an additional sheet.

**Why do you think the applicant should attend college? What potential do you see in the applicant?** (Please be as specific as possible)

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What are the applicant’s goals for the future? (Please be as specific as possible)

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What barriers or challenges have prevented or are preventing the applicant from attending college? What barriers or challenges may affect the ability of the applicant to stay in college? (Please be as specific as possible. Your response helps the committee determine which applicants are most in need of the program.)

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Please share with the committee any other information that you feel will help the committee understand the applicant’s current life situation and how this program would help the applicant. (This program is for students that will NOT be able to attend college without this support.)

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I agree that the information I have provided in this form is correct:

Signature: _______________________________ Date: __________________