

# PO'OKELA (EXCELLENCE) SCHOLARSHIP APPLICATION

Applications will be accepted until all  
scholarships have been awarded.



The HPA Scholarship Committee  
65-1692 Kohala Mountain Road  
Kamuela, Hawai'i 96743-8476  
E-mail: scholarship@hpa.edu ▪ Web: www.hpa.edu

## A COMPLETE APPLICATION INCLUDES:

- The Scholarship Application
- A current Secondary School Admission Test (SSAT) score report on file with the Admission Office (School Code: 3766)
- An SSS Family Report - for applicants who are applying for the need-based assistance component.

## PART I

Name of applicant: \_\_\_\_\_  
Last (Family) First (Given) Middle

Current grade (or grade/level last completed): \_\_\_\_\_

Answer one of the following:

I am a current HPA student. I entered HPA in grade: \_\_\_\_\_

I will enter HPA this fall. The school I am leaving is: \_\_\_\_\_

I am applying for the \_\_\_\_\_ academic year.

How did you first hear about this scholarship? \_\_\_\_\_

## PARENTS/GUARDIANS

ADULT 1 – Relationship to applicant: \_\_\_\_\_

Prefix:  Mr.  Mrs.  Ms.  Dr.  Other: \_\_\_\_\_ Name: \_\_\_\_\_  
Last First M.I.

Address (line 1): \_\_\_\_\_ Home phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
Area Code Phone Number

Address (line 2): \_\_\_\_\_ Cell phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
Area Code Phone Number

Primary E-mail: \_\_\_\_\_

ADULT 2 – Relationship to applicant: \_\_\_\_\_

Prefix:  Mr.  Mrs.  Ms.  Dr.  Other: \_\_\_\_\_ Name: \_\_\_\_\_  
Last First M.I.

Primary E-mail: \_\_\_\_\_ Cell phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
Area Code Phone Number

## RELEASE/CERTIFICATION

We (parents and applicant), give permission for HPA to release all school information (including transcripts, recommendations, teacher reports, etc.) and or all Admission Office application information to The HPA Scholarship Committee. We understand that all information provided as part of this application, including recommendations, is confidential and that this information will not be shared with me or released to any other school or agent.

\_\_\_\_\_  
Applicant Signature (REQUIRED) \_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian 1 Signature (REQUIRED) \_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian 2 Signature (REQUIRED) \_\_\_\_\_  
Date

## TO THE SCHOLARSHIP APPLICANT

*The HPA Scholarship Committee will read all applications in a BLIND REVIEW (i.e., they will have Part II and III of this application, but not Part I). Please complete Parts II and III of this application WITHOUT providing your name or other identifying information. IMPORTANT: All responses should be in the applicant's own words.*

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## **PART II**

WITHOUT providing your name or other identifying information, please briefly respond to the following:

1. Are you applying for boarding or day enrollment?
2. Where do you live? If you reside in more than one place, please identify each.
3. List the gender and age of each of your siblings.
4. Describe your relationship with your siblings, being as candid as possible.
5. What do your parents do for a living?
6. What is your greatest fear and why?
7. List three specific ways that you help your community.
8. How do you spend your free time?
9. What brings you the greatest joy and why?
10. What is your favorite thing about school and why?
11. What is your least favorite thing about school and why?

12. In one detailed sentence, explain how *OTHERS* might describe you.
13. List two academic and two extracurricular areas in which you excel. Which of these is your greatest area of strength?
14. List up to five awards or honors you have received in your life.
15. Describe an unusual talent/skill you have.
16. What is the most adventurous thing you've ever done?
17. What has been your greatest moment in school and why?
18. What has been your greatest moment in life and why?
19. Why is HPA the right school for you?
20. How will you make HPA a better place to live and learn?
21. What do you see as your position in life 10 years from now?

### **PART III**

On a separate, type-written sheet, and WITHOUT providing your name or other identifying information, please write a 500 to 1,000 word autobiography addressing the areas below and staple it to this application form. You are encouraged to advocate for yourself as much as possible—modesty and brevity will not work in your favor when completing this application.

1. Describe the challenges, opportunities, or landmarks (positive or negative) in your life that helped shape the person you are today.
2. Describe activities you've been involved with or provide examples that demonstrate your sense of commitment and your desire for self-improvement?

### **SUBMISSION**

Please send your completed application to:

THE HPA SCHOLARSHIP COMMITTEE  
65-1692 Kohala Mountain Road  
Kamuela, Hawai'i 96743-8476  
E-mail: [scholarship@hpa.edu](mailto:scholarship@hpa.edu)