

**The La-Vera Garcia Peace
Internship/Scholarship**

Application Form

Name of Applicant: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Date of Birth: _____

University to which you are
transferring: _____

Field of study: _____

GPA: _____

Comments

(Please include areas of specific interest)

I certify under penalty of perjury that the information provided in this
application is true and correct.

Signature of applicant

Date