**COMMUNITY ACTION OF SOUTHERN KENTUCKY, INC.**

**EDUCATIONAL SCHOLARSHIP**

Community Action Use Only

Date Received

\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Complete**

**Y/N**

**2019-2020**

By ***March 20, 2020***, please submit the following to your Guidance Office, Youth Service Center, or County Coordinator:

1. completed application form;
2. written proof of gross household income for the month prior to date of

application (complete form & attach written documentation);

1. proof of registration or acceptance to post-secondary institution;
2. letter of recommendation (form included);
3. release of information; and
4. high school transcript or proof of GED.

LEGAL NAME:

Social Security Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone #: (\_\_\_\_)

Home Mailing Address:

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

Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age:

Mother/Guardian Name (if applicable):

Father/Guardian Name (if applicable):

Name of High School:

Address of High School:

###### City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_ Zip:

**Guidance Counselor/Youth Service Center Coordinator Name (if applicable):**

**High School Graduation Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GED received:**

**Number of Persons in Household: \_\_\_\_\_\_\_Gross income from all sources for all household members**

**for previous month (see attached form) $**

Name of school I plan to attend:

Address of school I plan to attend:

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

###### Date I plan to enter post secondary school:

Date I plan to graduate:

Major field of study I plan to pursue:

Career Objective:

Community involvement:

**Volunteer &/or work experience:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I have \_\_\_\_\_\_ have not \_\_\_\_\_\_ applied for financial assistance. (Loans, Grants, Scholarships)**

**Please list:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I have \_\_\_\_\_\_ have not \_\_\_\_\_\_received financial assistance. (Loans, Grants, Scholarships)**

**Please list:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I am \_\_\_\_\_\_ am not \_\_\_\_\_\_ related to anyone who works at Community Action of Southern Kentucky.**

**Name of relative:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please compose a paragraph on “How I plan to contribute to my community through my career choice.” (Continue on back if necessary.)