

THE SHINE CDC Scholarship Program

Program Guidelines & Priorities:

* Seeking graduating seniors experiencing financial need who also have a record of volunteerism in the community and/or participation in extracurricular school activities.

The applications will be reviewed by a committee consisting of volunteers. The scholarships will be awarded on Sunday, August 28, 2022. **DEADLINE TO SUBMIT WILL BE SUNDAY, JULY 31, 2022.**

Please submit all application materials to: info@shinecdc.org Attn: Scholarship Committee

SCHOLARSHIP APPLICATION

1.	Last Name:	First Name:
2.	Mailing Address Street: City: State: Zip:	
3.	Daytime Telephone Number: Email Address:	
4.	Date of Birth: Month Day Year Gender:	
5.	Cumulative Grade Point Average (GPA): _____ (On a 4.0 scale) Attach proof of GPA. Your most recent school transcript is required.	
6.	Are you the first person in your family to go to college: YES ___ NO ___	
7.	Name and location of High School attending:	
8.	(If your resume or activities sheet answers question 8, please attach and skip to Question 9.) A. List any academic honors, awards, and membership activities while in high school: B. List your hobbies, outside interests, extracurricular activities, and school related volunteer activities: C. List your non-school sponsored volunteer activities in the community:	
9.	A. If you have decided on what college you will attend, please list school name: B. If not, list your top three college choices:	
10.	Name & address of parent(s) or legal guardian(s): (Include address if different than your own listed in Question 2.) Name(s): Street: City: State: Zip: Home phone of parents or legal guardians: Work phone:	

11. On a separate sheet please submit an essay (250 - 500 words) answering one of questions below:

1. Why do you believe receiving a college education is so important to the success of your future?
2. Reflect on a time when you questioned or challenged a belief or idea. What prompted your thinking? What was the outcome?
3. Discuss an accomplishment, event, or realization that sparked a period of personal growth and a new understanding of yourself or others.

STATEMENT OF ACCURACY FOR STUDENTS

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship winner my picture may be taken and used to promote the S.H.I.N.E.-CDC Scholarship program. (Winner may waive photo due to unusual or compelling circumstances.)

I hereby understand that if chosen as a scholarship winner, according to the S.H.I.N.E.-CDC Scholarship policy, I must be present at any potential awards ceremony held on August 28, 2022, to receive my scholarship award.

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for the scholarship.

Signature of scholarship applicant: _____ **Date:** _____