

SCHOLARSHIP APPLICATION

Hoops4Life, Inc. is offering three scholarships to students from Waterbury and surrounding towns. The selection committee will select one winning candidate for each scholarship based on scholarship criteria and information candidates provide.

Hoops4Life, Inc. B. Barnard Gilliam Memorial Scholarship

Inspiring Educator Scholarship is for a senior high school student who demonstrates to inspire students of all abilities to achieve their best, encourage them to pursue excellence and giving back to the community.

Hoops4Life, Inc. Wardell (Butch) Ward Jr. Memorial Scholarship

Outstanding Leader Scholarship is for a senior high school student who participates in more than one sport and demonstrates qualities of compassion and service to an organization in the community.

Hoops4Life, Inc. Christopher Blake Love Memorial Scholarship

Academic Achievement Scholarship is for senior high school student who demonstrate how their life experiences have impacted their academics.

IMPORTANT INSTRUCTIONS

Please indicate which Scholarship(s) you are applying for:

- Hoops4Life, Inc. B. Barnard Gilliam Memorial Scholarship**
- Hoops4Life, Inc. Wardell (Butch) Ward Jr. Memorial Scholarship**
- Hoops4Life, Inc. Christopher Blake Love Memorial Scholarship**

It is the applicant's responsibility to see that all supporting documents are submitted in one package together in the order noted below on or before **T.B.A. 2021** , **No exceptions or extensions will be given.**

Mail or Deliver to:

Hoops4Life, Inc.
232 North Elm Street
Waterbury, CT 06702

1. Application
2. Official High School Transcript with school stamp or seal
3. Three (3) letters of recommendation: two (2) from a teacher or counselor familiar with the student's academic ability and one (1) from a community leader or agency representative familiar with the students volunteer activities.
4. Essay

Please note that finalists may be called for an **informal interview**. Final decision will be made by May 30, 2017. Notifications will be sent to the student's permanent address in June. **It is imperative that all recipients be present at the award ceremony.** If you have any questions please contact Carolyn Highsmith at 203.577.8034.

Together everyone achieves more.

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PART II

STUDENT:

Full Name: _____

Address: _____

Cell Phone: _____ E-mail: _____

FAMILY:

MOTHER

FATHER

Name	<u>MOTHER</u>	<u>FATHER</u>
Address	_____	_____
Occupation	_____	_____

Number of siblings (brothers and sisters) in household? _____

Number of siblings now attending college? _____

College planning to attend _____

Tuition _____ Room and Board _____

ESSAY

A 500 word or more essay stating your educational goals and career field, and how this scholarship would help you achieve those goals. The essay must be typed, double spaced, and written in English. **Spelling and grammar are taken into consideration by the selection committee.** Please take care to ensure that your work is a final edited format.

CERTIFICATION

All the information provided is complete and accurate to the best of my knowledge. Should I be awarded a Hoops4Life, Inc. scholarship I will use the award for expenses toward my college costs.

I acknowledge that it is my responsibility to submit a complete application package in the order stated to Hoops4Life, Inc. and comply with all deadlines. Incomplete or late application materials will result in ineligibility.

I acknowledge that it is imperative that I be present at the Annual Award Ceremony to receive my scholarship.

I hereby certified that I have read the application information and instructions, I understand and accept all conditions specified.

I understand that a copy of my college acceptance letter must be provided previous to disbursement of funds.

Falsification of information will result in termination of any scholarship granted. Failure to sign this certification will result in ineligibility.

Signature of Applicant

Signature of Parent/Guardian (If Applicant is under 18 years of age)

Date

Date

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PART III. TO BE COMPLETED BY SCHOOL COUNSELOR

I hereby certify that _____ is a high school Senior at _____ during the 2016-2017 school year and has maintained a cumulative Grade Point Average (GPA) of _____, based on a 3.0 (80-above) scale.

I also certify that the above is true to the best of my knowledge.

Printed Name of School Counselor

Signature of School Counselor

Date

(OFFICIAL SCHOOL STAMP OR SEAL)