

BELLWOOD NEIGHBORHOOD WATCH SCHOLARSHIP FUND CORPORATION



Scholarship Application

Date: _____

I. Applicant's Information:

(Print or type in black ink)

Name: _____
Last First Middle Initial

Social Security Number: _____ - _____ - _____ Date of Birth: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____ Email: _____

- African American/Non-Hispanic American Indian/Alaskan Native Asian/Pacific Islander
 Hispanic White/Non-Hispanic Other

Are you a United States Citizen? Yes No

If you answered No to the above question, please provide your current address: _____

How long have you lived at the above address: _____ If less than one (1) year, please provide

Previous address: _____ City: _____ State: _____ Zip: _____

Are you employed? Yes No Full time Part time Employer name: _____

_____ Address: _____ City: _____ State: _____

Self employed: How many hours do you work per week? _____ What Shift? _____

What is the household's gross monthly earnings? \$ _____ Other: _____

Please attach a copy of your and your parents W-2 forms. If not available, please explain.

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What year do you expect to graduate? _____ Major: _____

I will continue my education and attend Medical school [] Law school [] Other []:

Name of school: _____ Address: _____

City: _____ State: _____ Phone: _____

You must provide the following and attach them to your application, no exception:

- A copy of an original enrollment and acceptance letter (College letterhead)
- Copy of your and your parent(s) W-2's
- Official copy of your GED certificate or certified copy of your high school transcript (*and diploma, when available, for high school seniors*) or certified copy of your college transcript (*college students*)
- A two hundred fifty (250) word essay
- Three completed Recommender Forms (Printed or typed and signed by the recommender)
- Two (2) forms of identification (copies of driver's license, state ID, passport, birth certificate, etc.)

You must submit an essay of 250 words or more on one of the subjects/topics listed below:

- Community's responsibility to their youth
- The importance of education
- Your economic plans for the future
- Personal goals and how they will impact the future
- Crime or criminal behavior
- Other (*topic of your choice*)

Provide a list of community programs you are involved in as a volunteer. After school, religious programs and etc. are acceptable:

Please provide the following information about your high school:

Name of high school you graduated from: _____

Address: _____ City: _____ State: _____

Zip: _____ Phone: _____ Date Graduated: _____

Date you earned your GED: _____ High school GPA: _____

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IV. Tell us about yourself:

List any types of certificates and achievements you received in the last four (4) years. (Include dean's list, president list, honor roll, etc.) Indicate DNA, if this does not apply.

List the name(s) of any organization committees you have served on at school or outside of school. Indicate DNA, if this does not apply.

Please list all athletic activities, or extra curricular activities you participated in while attending high school or in your community. Indicate DNA, if this does not apply.

Have you received or anticipate receiving any financial assistance from other sources, such as grants, scholarship awards, loans etc.? Yes [] No []

If yes, please explain the source and amount:

List the names of three (3) people not related to you as character references. Ask each one of them to fill out and complete the Recommender Form with their signature. Submit original copies only.

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V. Agreement Statement:

I certify that the information supplied on this scholarship application form is true to the best of my knowledge.

I understand that I must submit my application on or before **April 15**, of each year, and all supporting documents must be submitted as soon as possible. Any application not submitted before the above stated deadline will be denied. I will agree to inform the scholarship board of directors of any additional information or changes to my application. I further authorize this organization to contact any person or organization concerning my application, to verify my character. I understand that the scholarship reviewing committee has the option of rejecting my application if any of the information on my application is incomplete or found to be false.

If I receive a scholarship from this organization, I promise to use the funds solely for the expenses related to the college I am attending.

I have read, and fully understand the qualifications and requirements of the BNWSFC and I give my permission for/to this organization to use my name, photo, and any statements for the purposes of advertising and raising funds in the newspapers, etc. to continue this program.

Applicant signature

Date:

Guardian/Parent signature

Date:

Application Received: Date: _____ Initials: _____

Transcript Received: Date: _____ Initials: _____

Applicant Notified: Date: _____ Initials: _____