

**Chester County Foster Parent Association
Scholarship Application**

Deadline is March 1, 2004. Please attach additional sheets as necessary. Return completed applications to:
Renee Granger, 348 Long Ridge Lane, Exton, PA 19341

Name: _____
Last First MI

Address: _____
Street City State ZIP

Date of Birth: _____ Social Security Number: _____

Telephone Number: _____ Agency: _____
Area Code/Phone Number

EDUCATION (High School(s) Attended) Year of Graduation: _____

Name of School Grades Attended County

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School Activities (Please describe your participation in school activities). _____

School Awards/Honors (Please list any awards or honors that you received at school.) _____

Community Activities (Describe your participation in activities in your community.) _____

EMPLOYMENT (Please list any jobs you have had.)

1. _____
Name of Employer Address Dates Employed

Job Duties (Please describe the major functions of your job.) _____

2. _____
Name of Employer Address Dates Employed

Job Duties (Please describe the major functions of your job.) _____

SCHOLARSHIPS/GRANTS (Please list any other scholarships or grants for which you are a candidate or know you will receive)

Name of Scholarship/Grant *Amount of Award*

College or school you plan to attend: _____

Address *City* *State* *ZIP*

The degree or certificate you are seeking: _____

Have you been accepted yet? Yes No Anticipated start date: _____

REFERENCES

1. Caseworker (From the county children and youth agency or Group Home.)

Name *County* *Telephone Number*

2. School Teacher/Counselor

Teacher's Name *Name of School*

3. Foster Parent, Parent, or Group Home Supervisor

Name *Telephone Number*

4. Personal Reference (Someone you have known for at least one year.)

Name *Relationship* *Telephone Number*

I, the applicant, acknowledge the following:

- ◆ All the information provided in this application and as attachments to this application is true and correct to the best of my ability.
- ◆ All application materials become the property of the CCFPA.
- ◆ I will provide confirmation to CCFPA of my acceptance at the school I will attend if I am selected to receive this scholarship.

I have included the following information with my computer application package: (Please check)

- typewritten statement (approximately 400 words) explaining why I should be chosen to receive this scholarship, including the reasons why this education/training opportunity is important to me;
- official high school transcript;
- letters of recommendation from at least three of the four references listed above;
- any additional letters of support or other materials I deem necessary to support my application; and
- a letter of acceptance from the college I plan to attend (may be submitted separate from the application package).

Signature of Applicant *Date*

If I am selected to receive a scholarship, I hereby authorize release of my name in and CCFPA publication or press release regarding the scholarship program. Your decision will not affect your application.

Signature of Applicant *Date* *Legal Guardian Signature* *Date*