



L. NATHAN HARE
PRESIDENT/CEO



2019

COLLEGE SCHOLARSHIP

Instructions and Application

Applications Accepted: September 19, 2018 - May 3, 2019

**Hand Delivered or Postmark Deadline:
May 3, 2019 by 5 p.m.**



COLLEGE SCHOLARSHIP PROGRAM

Hand Delivered or Postmark Deadline: May 3, 2019

The Community Action Organization of Western New York, Inc. Education Task Force is a collective unit of educators, administrators and corporate partners whose mission is to encourage, recruit and assist students with exploring post-secondary education options. Annually, the Education Task Force awards valuable scholarships to deserving students interested in pursuing a higher education. Priority will be given to applicants from underrepresented populations in colleges, universities and institutions of higher education. The actual cash awards will be made after the Education Task Force receives written proof of enrollment for the period covered by the award.

General Requirements

- All applicants must be a senior in good standing at a public, parochial, charter or private school in Erie County with a G.P.A. of 80 or higher.
- For students obtaining a General Equivalency Diploma (G.E.D.), it must be earned during this academic year. Evidence of a passing score of 2560 or higher must be submitted.
- Applicants who demonstrate financial need will be given priority.
- All applicants must send a **complete** packet which includes an application form, essay, official transcript, two (2) letters of recommendation and a FAFSA/Student Aid Report that includes EFC (Expected Family Contribution) page.

Application Process

Eligible applicants must complete this scholarship application in its entirety. Additional information may be attached. Please submit the following:

- _____ A completed **Education Task Force Scholarship Application** with your parent/guardian signature. Please type or clearly print your responses, including "N/A" for items that are not applicable to you. The application **MUST** be completed in its entirety and hand delivered or postmark no later than May 3, 2019.
- _____ An official high school transcript. Must include high school stamp and sealed in an envelope. **We will not accept student copies or other unofficial transcripts.**
- _____ **Copy of FAFSA / Student Aid Report; including answers to all questions asked. Cover page with "EFC" - Expected Family Contribution is required. If your EFC has an asterisk (*), this means the Free Application for Federal Student Aid (FAFSA) requires verification and is incomplete. An amount needs to be here to determine your financial need.**
- _____ Two (2) Recommendations (please use attached forms). One is an academic reference from your school highlighting your academic achievements. The other is a volunteer reference completed by a non-relative who is familiar with your extracurricular activities, volunteer/community service or professional performance (coach, church advisor, employer, teacher, etc.)
- _____ Written Essay of 500 words or less describing how will you use your education to impact (reduce) poverty in your community. The essay must also express why you are most deserving of this scholarship.

Selection Criteria/Process

Students who have demonstrated leadership within their academic and/or community activities are encouraged to apply. A minimum of ten (10) students will be selected to receive scholarships this year.

Successful candidates will be eligible to receive an educational stipend of **up to \$1,000** to be utilized towards educational expenses (tuition, campus housing, books, fees) during the 2018-2019 academic year.

For More Information

Call the Community Action Organization of Western New York, Inc. at 881-5150 ext. 4312 or visit www.caowny.org.

Mail or deliver application and all accompanying materials to:
Community Action Organization of Western New York, Inc.
Education Task Force Scholarship Committee
45 Jewett Ave, Suite 150
Buffalo, New York 14214-2441



2019 Scholarship Application

Application Deadline: May 3, 2019 (Hand Delivered or Postmarked)

The form must be completed and returned to the Community Action Organization of WNY, Inc. Fax or email submissions ARE NOT accepted. **Incomplete application packets will be disqualified.**

PLEASE check the following to make sure the information is included in your packet before submitting. Only applications with **ALL** the required information will be considered for a scholarship. If an applicant does not meet all the requirements, the application will be disqualified. Please refer to the "Application Process" section of the application for further explanation for each requirement.

- _____ Application - Information Sheet

- _____ Official Transcripts (W/GPA of 80 or better)

- _____ Essay

- _____ Student and Parent Signature
(Parent signature not required if student is 18 years of age)

- _____ Copy of FAFSA/Student Aid Report (SAR)

- _____ (1) Academic Recommendation

- _____ (1) Volunteer Recommendation

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Community
Action
Organization
of WNY



The surest way out of poverty is through education.

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This form must be completed and returned to CAOWNY. Incomplete application packets will be disqualified.

Personal Information - Please type or print clearly

First Name: _____ Middle: _____ Last Name: _____

Street Address: _____

City/Town: _____ State: New York Zip Code: _____

Phone Number: _____ Cell Number: _____ Email: _____

Ethnicity (check one) Optional

African American Caucasian Latino/Hispanic American
 Native American Asian African Other

Academic Profile (check one)

Name of your High School: _____

High School Address: _____

Expected Graduation Date: _____

Please share a brief history of your high school accomplishments:

Honors or Awards

1. _____ 4. _____ 7. _____
 2. _____ 5. _____ 8. _____
 3. _____ 6. _____ 9. _____

School Clubs / Organizations / Activities Outside of School

1. _____ 4. _____ 7. _____
 2. _____ 5. _____ 8. _____
 3. _____ 6. _____ 9. _____

Community Service Involvement and/or Employment

1. _____ 4. _____ 7. _____
 2. _____ 5. _____ 8. _____
 3. _____ 6. _____ 9. _____

Name of Colleges/Universities applied to:

1. _____ Accepted yes _____ no _____
 2. _____ Accepted yes _____ no _____
 3. _____ Accepted yes _____ no _____

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Essay

Please use a separate sheet of paper to discuss the following topic. Your response should be 500 words or less. All essays should be typed.

Question: Please describe how you will utilize your education to impact (reduce) poverty in your community. Also, why do you feel you are the most deserving of this scholarship?

Certification and Release Authorization

The following information must be completed for the applicant to be considered for the scholarship awards.

I certify that this information is true, complete and accurate. I authorize release of this information to confirm and/or verify this application. In addition, I give permission to the Scholarship Committee to duplicate my application packet for processing and evaluation purposes. If I am selected to receive a scholarship, I authorize the Community Action Organization of WNY, Inc. to use my name and likeness in any and all photographs, video and other forms of written or oral communication for the purpose of marketing, public relations or publicity to promote the CAO Education Task Force Scholarship Program.

Applicant's Signature: _____

Date: _____

Parent/Guardian Signature: _____
(not required if student is 18)

Date: _____

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Academic Recommendation Form

Please take the time to complete this brief questionnaire regarding the applicant. The CAO Education Task Force Scholarship Committee seeks to identify applicants from underrepresented populations in colleges, universities and institutions of higher education.

This form must be completed in its entirety by a school administrator highlighting the student's academic achievements. Additional information may be attached. The Committee may wish to contact you concerning the candidate you are recommending. Please give a daytime phone number and/or email where we can easily contact you.

Name of Applicant: _____**1. How long and in what capacity have you known this applicant?**

2. Please provide a brief example of how you have observed this applicant being an asset to their school and/or community?

3. Why would this applicant be the best candidate to receive a scholarship?

Any additional comments:

Print Academic Reference's Name: _____**Daytime Phone:** _____ **Email:** _____**Position:** _____**School:** _____**Signature:** _____

Thank You for your Support of this Scholarship Applicant!

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Volunteer/Community Service Recommendation Form

Please take the time to complete this brief questionnaire regarding the applicant. The CAO Education Task Force Scholarship Committee seeks to identify applicants from underrepresented populations in colleges, universities and institutions of higher education.

This form must be completed by a non-relative who is familiar with your extracurricular activities, volunteer/community service or professional performance (coach, church advisor, employer, teacher, etc.) Additional information may be attached. The Committee may wish to contact you concerning the candidate you are recommending. Please give a daytime phone number and/or email where we can easily contact you.

Name of Applicant: _____

1. How long and in what capacity have you known this applicant?

2. Please provide a brief example of how you have observed this applicant being an asset to their community?

3. Why would this applicant be the best candidate to receive a scholarship?

Any additional comments:

Print Volunteer/Community Service Reference's Name: _____

Daytime Phone: _____ **Email:** _____

Title or Volunteer Position: _____

Organization: _____

Signature: _____

Thank You for your Support of this Scholarship Applicant!

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