L. NATHAN HARE
PRESIDENT/CEO

EDUCATION TASK FORCE
The surest way out of poverty is through education.

2020
COLLEGE SCHOLARSHIP
Instructions and Application

Applications Accepted: September 20, 2019 - May 4, 2020

Hand Delivered or Postmark Deadline:
May 4, 2020 by 5 p.m.
COLLEGE SCHOLARSHIP PROGRAM
Hand Delivered or Postmark Deadline: May 4, 2020

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.
• Only applicants that meet the requirements and submit a completed packet will be interviewed.

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 4, 2020.

_____ 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.
2020 Scholarship Application
Application Deadline: May 4, 2020 (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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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:

Honor(s) 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: ____________________________ Date: __________
(not required if student is 18)

Hand Delivered or Postmark Deadline: May 4, 2020
**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!*  
**Hand Delivered or Postmark Deadline: May 4, 2020**
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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