

THE HARLAN COMMUNITY SCHOLARSHIP FUND, INC.

The applicant should:

1. complete parts A through D;
 2. obtain three (3) letters of reference (original signature required by the writer);
- and
3. return application to counselor by **Wednesday, April 15, 2020 at noon.**

NOTE: This application is available online to allow you the opportunity to provide a typed presentation. While a typed application is not required, it is encouraged. You may access the online form at <http://hccscholarship.wixsite.com/hccs>.

THE HARLAN COMMUNITY SCHOLARSHIP FUND, INC.

PART A

Applicant's Name _____

Parents/Guardian _____

Address _____

Telephone _____

School _____

I would like my application to be considered for the Harlan County Community Scholarship and agree to the release of and verification of information as indicated on the permission release form included with this scholarship application.

Harlan County Community Scholarship

(School or good quality photo must be included (do not staple or glue. If you use a paper clip please protect photo by placing it in an envelope). Photo copies of are not acceptable.

THE HARLAN COMMUNITY SCHOLARSHIP FUND, INC.

PART B

CRITERION ONE:

EVIDENCE OF PROMISE AS LEADER IN THE JOB FIELD AND/COMMUNITY

List school and community activities during the past four years. Specify leadership roles in those activities. (Please be specific, provide dates, hours contributed, etc.. Documentation of activities listed is beneficial.)

Of what value have the activities listed above been to you and your school and/or community?

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PART C

CRITERION TWO:

EVIDENCE OF WELL DEFINED COLLEGE AND/OR CAREER PLANS

Describe your college and/or career plans. If you have not established a career goal, indicate the process you plan to use in determining one.

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PART D

CRITERION THREE:

EVIDENCE THAT REFEREES HAVE POSITIVE ASSESSMENT OF APPLICANT

Identify three persons, *other than relatives*, who can assess your potential as a college student. Select persons who have direct knowledge of your academic and leadership ability. Of the three references, *please obtain at least one from someone who is not an educator*. It is required that one reference be from someone outside the education community. Give each referee a "Letter of Reference" form and ask that the completed form be returned to your high school counselor by the deadline specified.

(1) Referee's Name _____

Title _____

Company or Organization _____

Address _____

Telephone _____

(2) Referee's Name _____

Title _____

Company or Organization _____

Address _____

Telephone _____

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PART D (CONTINUED)

(3) Referee's Name _____

Title _____

Company or Organization _____

Address _____

Telephone _____

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PART E

(TO BE COMPLETED BY HIGH SCHOOL COUNSELOR)

CRITERION FOUR:

EVIDENCE OF HIGH SCHOOL PERFORMANCE

High School Attended: _____

Date of Graduation: _____

Rank in Class: _____ of _____

GPA _____ Curriculum Pursued _____

Be Specific (Attach Transcript)

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PART F

(TO BE COMPLETED BY HIGH SCHOOL COUNSELOR)

CRITERION FIVE:

EVIDENCE OF ACADEMIC ACHIEVEMENT AS MEASURED BY STANDARDIZED TESTS

ACT SCORES

SAT SCORES

(If Tested)

English	_____	_____
Math	_____	_____
Reading	_____	_____
Science Reasoning	_____	_____
Composite Score	_____	_____

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LETTER OF REFERENCE

Applicants Name _____

Referee's Name _____

Title _____

Company or Organization _____

Address _____

Telephone _____

In the space below indicate your perception of the above named person's ability to succeed in college and later in the professional world. Make specific references to performance that you believe indicates potential success.

Return by _____ to _____
at _____.

Signature of Referee

Date

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Permission to Obtain/Release Information

The information submitted on my application is accurate to the best of my knowledge. I understand the information submitted on my application is subject to verification.

I understand that biographical information and photographs will be distributed through media releases and social media to promote the scholarship program and the students selected.

I give my consent for verification of data to the selection committee and to the release of biographical information and photographs.

Signatures Required

Applicant Signature

Print Name

Date

(If applicant is not 18 years of age)

Parent/Guardian

Relationship to Applicant

Date