

NATCHITOCHEs COMMUNITY IMPROVEMENT FOUNDATION, INC.

P.O. Box 606, Natchitoches, Louisiana 71457

SCHOLARSHIP APPLICATION INSTRUCTION

EVALUATION CRITERIA

Applications for the scholarship are evaluated according to the following criteria:

- Must be a graduating senior the current school year.
- Must provide a comprehensive and complete application that is completed in ink.
- Must have a 2.5 (C+) or greater grade point average from the time of application through completion of the 12th grade. (**Must be a resident within the City limits of Natchitoches**)
- Must submit two letters of recommendation from community representatives including but not limited to a supervisor, religious leader, teacher or school counselor.
- Must submit scholarship application by **Monday, April 04, 2022** (Including official high school transcript and typed written essay).

APPLICATION PROCESS

- Obtain an application from the school counselor's office or from a member of the community foundation,
- Retrieve an official transcript of your high school grades from you school counselor. Submit **Original** of your completed scholarship application, written essay, and letters of recommendation and proof of community service.

ADDITIONAL INFORMATION

- The scholarship will be awarded based on a comprehensive and quality application with supporting document. In addition, awards will be based on the evaluation criteria. High school grades will be considered, but are not the only basis for selection.
- Scholarships awarded for \$500.00 per semester (for two semesters). The student will receive the award directly from the scholarship committee. Scholarship recipients will be notified by mail.
- Funds will be released upon receipt of proof of registration into four year college/university. Proof of registration must be official.

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Please type or print

PART I: PERSONAL INFORMATION

Last Name **First Name** **MI**

Address(No P.O. Box) **City** **State** **Zip**

Telephone Number **Email**

Parent's /Guardian's Name

PART II: EDUCATION INFORMATION

Name of High School **Telephone Number**

Name of High School Counselor **(Signature)**

Cumulative Grade Point Average*** **Date**

**** High school transcripts must be provided directly from school in a sealed envelope.**

PART III: Education Plan

Expected College Major **Career Goal**

Identify each of the college/universities to which you have applied.

Name & Location of College

Name & Location of College

Please type or print legibly.

PART IV: Written essay (500 Words)

Applicant must write a 500 words essay using the theme, “the Importance of education and what it means to you. Be sure to include your views on how a college education will better prepare you for the social, economic and political challenges facing the survival and prosperity of our community. Must be typed, double spaced, font 12 with 1” margins.

PART V: RECOMMENDATIONS

Two letters of recommendation must accompany this application. One letter must be from a teacher, counselor, or principal at your high school. The second letter must be from a person who can verify your involvement in community service and/or religious activities. **Applications submitted without this supporting documentation will not be considered. Please submit application/essay to the enclosed address.**

The letters of recommendation should clearly identify the name of the student and high school and address why this student deserves our support. All letters should be submitted in sealed envelopes and included with the final application package.

PART VI: PARENT AND STUDENT SIGNATURE

I hereby affirm that I am a graduating senior meeting all the criteria set forth above and that all the statements presented in this application are true. I have enclosed the necessary high school transcript and other supporting documentation. I am willing to provide additional information should it be required. I agree to abide by all rules and regulations governing the decision and award of the Scholarship committee.

I hereby grant permission for a representative of the Scholarship committee to obtain information from my guidance counselor regarding this application.

I hereby affirm that the information presented in this application is true to the best of my knowledge. I hereby understand that any information submitted falsely will result in forfeiture of the scholarship.

Applicant’s Signature

Parent/Guardian Signature