

NAME \_\_\_\_\_

SCHOOL \_\_\_\_\_

SCHOOL COUNSELOR \_\_\_\_\_

**DEADLINE: Monday, March 5, 2018, 5:00 p.m.**

The Garden Grove Education Association (GGEA) is awarding six scholarships to graduating seniors of the Garden Grove Unified School District. Two of the six scholarships are designated for graduating seniors of a GGEA member. Applicants may be considering any field of study, but must be entering a vocational/trade school, community college, four-year college, or university in the Fall of 2018. Criteria for selection includes financial need, academic achievement, community service, school activities, and personal interviews.

The scholarships are \$2,000 each and will be paid at the beginning of the 2018 Fall semester. Scholarship winners must turn in proof of registration as a full-time college student to receive funds.

**INSTRUCTIONS FOR APPLICATION: (All information is strictly confidential)**

- \_\_\_ 1. Complete the attached application **pages 1-8**. Applications with incomplete information will be rejected.
- \_\_\_ 2. Request that your school send an official transcript of your records to the GGEA office.  
(Transcript must include grades from first semester of senior year, G.P.A, and class ranking.)
- \_\_\_ 3. Submit a copy of the last filed income tax return for proof of income of parent/guardian: (check one)  
 2017 Income Tax Return                       2016 Income Tax Return

- If exempt from filing, submit one of the following:
- AFDC Aid to Families with Dependent Children)
  - SSI/Disability (Supplemental Security Income)
  - TANF (Temporary Assistance for Needy Families)

**\*\*Students: Also include your individual income tax return if filed.**

**Application is incomplete without the necessary forms for proof of income.**

- \_\_\_ 4. Submit three (3) recommendation forms to individuals of your choice. Two (2) must be from school personnel, and **one (1) must be from another adult (not a classmate or relative) in the community outside of school.**

**\*\*\*RECOMMENDATIONS NOT IN A SEALED ENVELOPE WILL NOT BE READ BY THE COMMITTEE\*\*\***

<u>NAME</u>	<u>PLACE OF EMPLOYMENT</u>	<u>POSITION</u>	<u>PHONE #</u>
(School Personnel) _____			
(School Personnel) _____			
(Other Non-School Personnel) _____			

- \_\_\_ 5. Your counselor must sign page 3 of the application to verify your school activities.
- \_\_\_ 6. Applicants are responsible for mailing or hand delivering applications to the GGEA office by **Monday, March 5, 2018 at 5:00 p.m.**  
 GGEA Office, Scholarship Committee  
 12966 Euclid Street, Suite 100  
 Garden Grove, CA 92840  
 (714) 638-7480
- \_\_\_ 7. All semi-finalists must be available for personal interviews with the Scholarship Committee on **Friday, Apr 20, 2018** in the morning or they will be disqualified.
- \_\_\_ 8. Return this form with your application.

GARDEN GROVE EDUCATION ASSOCIATION

**Scholarship Application** (Postmark or deliver by **Monday, March 5, 2018 - 5:00 P.M.**)

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Student's email address: \_\_\_\_\_

Parent(s) or Guardian(s) \_\_\_\_\_

Father's Occupation \_\_\_\_\_ GGEA Member: Yes / No School \_\_\_\_\_

Mother's Occupation \_\_\_\_\_ GGEA Member: Yes / No School \_\_\_\_\_

Number of dependents under 21 in family \_\_\_\_\_

List immediate family members attending college:

<u>Name</u>	<u>College</u>	<u>Age</u>	<u>Full or Part-time</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Family Gross Annual Income: \_\_\_\_\_ Residence: Own \_\_\_\_\_ Rent \_\_\_\_\_

X \_\_\_\_\_  
Parent/Guardian signature for verification of income. **(Application is incomplete without signature.)**

List all grants, scholarships, loans, or other financial assistance for which you have applied.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Do you have an outside job?** \_\_\_\_\_ If yes, hours per week \_\_\_\_\_ Approximate salary per week \_\_\_\_\_

Length of time at present job \_\_\_\_\_

Job description \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

**If you do not have a job, please explain** \_\_\_\_\_

An important criteria for selection is the demonstration of financial need. Please explain why you need this scholarship. Also include how you plan to supplement your education expenses.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**LIST ALL ACTIVITIES YOU HAVE BEEN INVOLVED IN FOR THE LAST FOUR (4) YEARS.**

The following information is true and correct.

X \_\_\_\_\_  
Student Signature

X \_\_\_\_\_  
Counselor Signature

**A. ACTIVITY RECORD FOR SCHOOL (Please indicate all offices held.)**

List number of **HOURS** per year

**SPORTS, CLUBS, ASB, PERFORMING ARTS, ETC.** (not including class time)      **9<sup>th</sup>**      **10<sup>th</sup>**      **11<sup>th</sup>**      **12<sup>th</sup>**

	9 <sup>th</sup>	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>

**B. ACTIVITY RECORD FOR COMMUNITY/VOLUNTEER SERVICE**

List number of **HOURS** per year

**SPECIFIC EVENTS AND HOURS**      **9<sup>th</sup>**      **10<sup>th</sup>**      **11<sup>th</sup>**      **12<sup>th</sup>**

	9 <sup>th</sup>	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>

**AWARDS, HONORS, ACHIEVEMENTS**

Place an X in grade column for year received

**9<sup>th</sup>**      **10<sup>th</sup>**      **11<sup>th</sup>**      **12<sup>th</sup>**

	9 <sup>th</sup>	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>

**PERSONAL ACHIEVEMENTS**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**INTENDED SCHOOL OF ATTENDANCE**

**FIRST CHOICE**

Name of College \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Intended field of study/major \_\_\_\_\_

Tuition	Books	Board/Room	Total Costs	Amount of Loans/Scholarships

Why do you want to attend this college? \_\_\_\_\_

Accepted: Yes \_\_\_\_\_ No \_\_\_\_\_ Not yet notified \_\_\_\_\_

Do you plan to live at home? Yes \_\_\_\_\_ No \_\_\_\_\_

Explain \_\_\_\_\_

**ALTERNATE CHOICE**

Name of College \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Intended field of study/major \_\_\_\_\_

Tuition	Books	Board/Room	Total Costs	Amount of Loans/Scholarships

Why do you want to attend this college? \_\_\_\_\_

Accepted: Yes \_\_\_\_\_ No \_\_\_\_\_ Not yet notified \_\_\_\_\_

Do you plan to live at home? Yes \_\_\_\_\_ No \_\_\_\_\_

Explain \_\_\_\_\_

Based on your financial status, which school have you chosen to attend?

Have you applied for aid directly from this college? \_\_\_\_\_ What kind? \_\_\_\_\_

Complete a **HAND-WRITTEN STATEMENT** indicating your chosen field of study, specific goals, and reason you consider yourself qualified to receive this scholarship. (Limit yourself to approximately 150 words.)

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

I hereby affirm that I intend to enter an accredited school of higher education as a full-time student, and that I propose to use the funds, if awarded, for that purpose. I understand that my enrollment must be completed within the current calendar year.

---

Signature

---

Date

GARDEN GROVE EDUCATION ASSOCIATION/CTA/NEA  
SCHOLARSHIP RECOMMENDATION

Please use the form below **OR** submit a letter of recommendation. Recommendations must **NOT** be given to the student. Please place the recommendation in a sealed envelope with your signature on the back and mail or deliver to the address below.

This is a recommendation for \_\_\_\_\_ of \_\_\_\_\_ High School who is applying for the Garden Grove Education Association (GGEA) Scholarship.

	Average	Above Average	Out-standing	<b>Please give your honest opinion of this student.</b>
Academic Potential *				
Attendance *				
Leadership *				
Initiative *				
Reliability *				
Integrity *				
Enthusiasm *				
Attitude towards others *				
Attitude towards self *				
Civic responsibility *				
Organization *				
Originality *				
Financial need *				

\* If you have not had a chance to observe any of these qualities, please write N/A.

Additional comments that may be helpful to the Scholarship Committee in making their selection: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_  
 Address \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Place of employment \_\_\_\_\_ Position \_\_\_\_\_  
 Relationship to Applicant \_\_\_\_\_

Mail to: GGEA Office, Scholarship Committee  
12966 Euclid Street, Suite 100  
Garden Grove, CA 92840

GGUSD teachers may send recommendations to GGEA through district mail.  
Attn: Scholarship Committee

**POSTMARK OR DELIVER TO THE GGEA OFFICE BY MONDAY, MARCH 5, 2018 5:00 P.M.**

GARDEN GROVE EDUCATION ASSOCIATION/CTA/NEA  
SCHOLARSHIP RECOMMENDATION

Please use the form below **OR** submit a letter of recommendation. Recommendations must **NOT** be given to the student. Please place the recommendation in a sealed envelope with your signature on the back and mail or deliver to the address below.

This is a recommendation for \_\_\_\_\_ of \_\_\_\_\_ High School who is applying for the Garden Grove Education Association (GGEA) Scholarship.

	Average	Above Average	Out-standing	Please give your honest opinion of this student.
Academic Potential *				
Attendance *				
Leadership *				
Initiative *				
Reliability *				
Integrity *				
Enthusiasm *				
Attitude towards others *				
Attitude towards self *				
Civic responsibility *				
Organization *				
Originality *				
Financial need *				

\* If you have not had a chance to observe any of these qualities, please write N/A.

Additional comments that may be helpful to the Scholarship Committee in making their selection: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_  
Street City Zip  
Place of employment \_\_\_\_\_ Position \_\_\_\_\_  
Relationship to Applicant \_\_\_\_\_

Mail to: GGEA Office, Scholarship Committee  
12966 Euclid Street, Suite 100  
Garden Grove, CA 92840

GGUSD teachers may send recommendations to GGEA through district mail.  
Attn: Scholarship Committee

**POSTMARK OR DELIVER TO THE GGEA OFFICE BY MONDAY, MARCH 5, 2018 5:00 P.M.**

**GARDEN GROVE EDUCATION ASSOCIATION/CTA/NEA  
SCHOLARSHIP RECOMMENDATION**

**Please use the form below OR submit a letter of recommendation. Recommendations must NOT be given to the student. Please place the recommendation in a sealed envelope with your signature on the back and mail or deliver to the address below.**

This is a recommendation for \_\_\_\_\_ of \_\_\_\_\_ High School who is applying for the Garden Grove Education Association (GGEA) Scholarship.

	Average	Above Average	Out-standing	<b>Please give your honest opinion of this student.</b>
Academic Potential *				
Attendance *				
Leadership *				
Initiative *				
Reliability *				
Integrity *				
Enthusiasm *				
Attitude towards others *				
Attitude towards self *				
Civic responsibility *				
Organization *				
Originality *				
Financial need *				

\* If you have not had a chance to observe any of these qualities, please write N/A.

**Additional** comments that may be helpful to the Scholarship Committee in making their selection: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Place of employment \_\_\_\_\_ Position \_\_\_\_\_  
 Relationship to Applicant \_\_\_\_\_

**Mail to:** GGEA Office, Scholarship Committee  
 12966 Euclid Street, Suite 100  
 Garden Grove, CA 92840

GGUSD teachers may send recommendations to GGEA through district mail.  
 Attn: Scholarship Committee

**POSTMARK OR DELIVER TO THE GGEA OFFICE BY MONDAY, MARCH 5, 2018 5:00 P.M.**