



Application for the 2018 Charlotte Lemons Annual Student Scholarship (C.L.A.S.S.) Award

AWARD(S) AMOUNT: \$1,000 & \$ 5,000

C.L.A.S.S. AWARD

In our continuing efforts to support higher education and community involvement, Make A Difference Foundation, Inc. (MADF) established the Charlotte Lemons Annual Student Scholarship (C.L.A.S.S.) award. This scholarship is intended to give students in need of financial assistance the opportunity to further their education at a two or four-year college and/or technical institution. Each year, \$1,000 & \$5,000 scholarships are awarded to graduating high school seniors throughout the state of Georgia. ***These scholarships are one-time awards and recipients can only receive one of each, not both.***

ELIGIBILITY CRITERIA - \$1,000 AWARD

To be considered for this scholarship, the candidate must:

- Be a United States Citizen
- Be a Georgia resident
- Be a graduating high school senior (*graduating in the Spring of 2018*)
- Have a cumulative overall GPA of 2.5 or better (on a 4.0 scale)
- Provide a copy of the SAT or ACT score report with the application
- Submit an official high school transcript
- Submit a 1-2 page essay on the topic provided
- Provide a brief personal statement of financial need
- Submit one letter of recommendation from a teacher, counselor, or organization leader (pastor, employer, etc.)
- Be able to “Pay It Forward” by volunteering for at least one (1) MADF fundraising event.
- The recipient will receive a one-time disbursement of \$1,000. **The award will be disbursed after the recipient has completed one semester of his/her first year.** The recipient must notify Make A Difference Foundation, Inc. after the completion of his/her first semester in order for the scholarship funds to be disbursed.

Applicant's Name: _____

ESSAY TOPIC FOR THE \$1,000 AWARD

Submit a 1-2 page essay on the topic "Making A Difference In My Community", in which the applicant identifies a need in his/her neighborhood and describes a plan to address that need. **The essay should be submitted as a separate copy and attached to the application. It must be typed, single-spaced, and in 12-point font.**

ELIGIBILITY CRITERIA - \$5,000 AWARD

Applicants for the \$5,000 award will automatically be considered for the \$1,000 award, but can only receive one award. A separate application is not necessary.

To be considered for this scholarship, the candidate must:

- Be a United States Citizen
- Be a Georgia resident
- Be a graduating high school senior (*graduating in the Spring of 2018*)
- Have a cumulative overall GPA of **3.0** or better (on a 4.0 scale)
- Provide a copy of the SAT or ACT score report with the application
- Submit an official high school transcript
- Submit a 2-3 page essay on the topic provided
- Provide a brief personal statement of financial need
- Provide a copy of your Free Application for Federal Student Aid (FAFSA), Financial Aid/Scholarship report, and/or Student Aid Report (SAR)
- Submit a minimum of three (3) letters of recommendation from a teacher, counselor, or organization leader (pastor, employer, etc.). At least one must come from a current teacher
- Be able to "Pay It Forward" by volunteering for at least one (1) MADF fundraising event
- If selected as a finalist, the applicant **may be required** to interview with the Selection Committee. (*Students located outside the Atlanta area may be offered an opportunity to interview via phone/video conferencing. This decision will be solely at the discretion of the Selection Committee. Notification of the interview date, time and location will be sent via the e-mail and postal address provided in this application at least two (2) weeks prior to interview*)
- Award will be disbursed incrementally in two (2) equal payments of \$2,500 per year over the first two (2) years of enrollment. **The recipient will receive his/her first payment after he/she has completed one semester of his/her first year.** In addition, the recipient will be required to maintain a full course load each year. The recipient must also maintain an acceptable GPA each year as follows:
 - Year one (Freshman) – 2.75 or better (on a 4.0 scale)
 - Year two (Sophomore) – 2.85 or better (on a 4.0 scale)

ESSAY TOPIC FOR THE \$5,000 AWARD

Submit a **3-4 page** essay on the following topic:

Our country is facing many issues that affect the well-being and security of its citizens. Examples of such issues include gun violence, increased racial tension, healthcare coverage, equal rights, bullying, global warming and terrorism. What current issue concerns you the most and why? And if you had an opportunity to address President Trump and/or Congress with your concerns, what ideas or solutions would you offer to address the problem? **The essay should be submitted as a separate copy and attached to the application. It must be typed, single-spaced, and in 12-point font.**

SELECTION CRITERIA

The Scholarship Selection Committee will review the documents requested in the Application Checklist. In reaching their decision, the Committee will consider the content and completeness of the application; the applicant's response to the essay question, interests, and accomplishments as reflected on his or her application; the applicant's personal statement of financial need and supporting financial documentation if applicable; the letter of recommendation(s); and educational goals.

NOTIFICATION OF THE AWARD

The recipient(s) of these scholarships will be notified on or around **May 7, 2018**. Once the recipient has been accepted to a college, university, or technical school, a copy of the acceptance letter should be forwarded to Make A Difference Foundation, Inc. Awards are distributed directly to the Financial Aid representative at that institution. (It will be the responsibility of the recipient to submit to the MADF office all required documentation each year, as proof of his or her compliance, in order to receive the annual disbursements.) Scholarship funds have to be used within one academic school year following the awarding of the scholarship. Scholarship recipients must be able attend the Make A Difference Foundation, Inc. Annual C.L.A.S.S. Awards Dinner. At this event, they will be officially recognized for their achievement. Recipients will be notified of the event location, day and time at a later date. *(Hotel stay will be provided for all non local recipients and their parents or legal guardians).*

APPLICATION DEADLINE AND PROCEDURES

Please indicate your intent to apply for this scholarship by sending an email to classaward@madf.org.

- The subject line should read: "CLASS - Intent to Apply".
- Include:
 - ✓ Your name
 - ✓ Mailing address
 - ✓ Evening phone
 - ✓ High School

Applicant's Name: _____

We will use your e-mail address to send a reminder about the application deadline and to confirm the receipt of your application. **If you do not have an e-mail address**, please notify us of your intent to apply by calling 1-888-700-5654 and leaving the information requested above. To be considered for the 2018 C.L.A.S.S. Award, the MADF office MUST receive the entire application package no later than Monday **April 16, 2018**. *IMPORTANT: Applicants will not be considered for this award if ALL application materials and supporting documents are not received at the MADF office by the April 16, 2018 deadline.*

Return completed application with all required materials to:

Preferred Method (e-mail submission)	Scholarship Selection Committee Download the application via the MADF website by clicking Scholarship Application under the Scholarship “Apply” Page of the MADF website. E-mail the completed application to classaward@madf.org . <i>**Official sealed documents should be mailed separately to the MADF office unopened (ex. transcripts, letters of recommendation etc.)**</i>
Secondary Method (traditional mail)	Scholarship Selection Committee <i>Mail Completed Application to:</i> Make A Difference Foundation, Inc. 990 Peachtree Industrial Blvd, #1941 Suwanee, GA 30024-0875

For *questions* or concerns, call 1-888-700-5654 or send an email to classaward@madf.org.

Applicant's Name: _____



C.L.A.S.S. AWARD APPLICATION

<i>First Name</i>	<i>MI</i>	<i>Last Name</i>	
<i>Home Address</i>	<i>City</i>	<i>State</i>	<i>Zip</i>
<i>Phone (1)</i>	<i>Phone (2)</i>	<i>Date of Birth</i>	<i>Male/Female</i>

E-mail

Cumulative Grade Point Average (GPA): _____

Activities: List your extra-curricular school and community activities. (Example: student government, athletics, orchestra, clubs, church participation, offices held, awards, etc.)

Extra-Curricular Activities	Date(s) of Participation	Your role(s), position, and honors
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Community Service:	Date(s) of Participation	Your role(s), position, and honors
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Applicant's Name: _____

Awards/Recognitions:

Date(s)

Participation

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Work Experience/
Position**

**Date(s)
of Employment**

Job Description

_____	_____	_____
_____	_____	_____
_____	_____	_____

Education Plans:

To which college or university do you plan to attend or apply?

Indicate the degree/discipline you intend to pursue: _____

Briefly give your educational plans, future goals, and areas of interest.

Applicant's Name: _____

APPLICANT RECOMMENDATION

Applicant Release

For completion by the Applicant: An originally signed copy of this release must accompany the Letter of Recommendation submitted in the application package.

I, _____, hereby authorize the person writing this
(Applicant's name)

Letter of Recommendation (_____) to release any
(Name of Recommender)

and all information called for on this form to the *C.L.A.S.S.* Award Program.

Applicant Signature

Date

=====

Name of Recommender: _____

Title: _____ Organization: _____

Address: _____

Phone: _____ Email: _____

For consideration by the person submitting a Letter of Recommendation on behalf of the Applicant:

The Make A Difference Foundation *C.L.A.S.S.* Program awards need-based scholarships to graduating high school seniors. The student whose name appears above is applying for this scholarship. The Selection Committee would appreciate your help as they consider his/her application. In your Letter of Recommendation, please respond to the questions that follow as fully as you can:

1. How long have you known the applicant and in what capacity?
2. What are the applicant's strengths and special talents?

*Your recommendation letter should be on letterhead, signed, and sealed. Please return your letter to the student so that it can be included in his/her application package. **Do not send your recommendation letter directly to Make A Difference Foundation, Inc.***

Applicant's Name: _____

APPLICATION CHECKLIST: 1,000 AWARD

The following materials must be included in your application package:

- Your completed application form, signed by a parent or guardian.
- Your completed 1-2 page essay
- Your official high school transcript
- A copy of your SAT or ACT scores Date Taken: _____
- Your brief statement of your financial need
- One letter of recommendation from a teacher, counselor, or organization leader (Pastor, employer, etc.). Be sure to attach the Applicant Release to your Letter of Recommendation.

APPLICATION CHECKLIST: 5,000 AWARD

The following materials must be included in your application package:

- Your completed application form, signed by a parent or guardian.
- Your completed 3-4 page essay
- Your official high school transcript
- A copy of your SAT or ACT scores Date Taken: _____
- Your brief statement of your financial need
- A copy of your FAFSA, Financial Aid/Scholarship and/or SAR report
- Three letters of recommendation from a teacher, counselor, or organization leader (Pastor, employer, etc.); at least one from a current teacher. Be sure to attach the Applicant Release to your Letter of Recommendation.

Your signature below indicates that all of the above materials are included in your application. **Incomplete applications will not be considered.**

Applicant Signature

Date

Applicant's Name: _____

Verification of Application

Recipients of the C.L.A.S.S. Award are ultimately representatives of Make A Difference Foundation, Inc. (MADF) and must demonstrate and uphold the highest standards of ethical conduct... promoting good citizenship and moral character. The recipient shall not commit any act or do anything that might tend to reflect unfavorably on MADF; inappropriate conduct could result in loss of scholarship.

If the applicant is selected as a scholarship recipient of either the \$1,000 or the \$5,000 award, a signed statement affirming these conditions will be required prior to payment being made. Any false statement or misrepresentation will be cause for denial and/or repayment of the scholarship and ineligibility for future awards.

I, the undersigned, have read and understand the conditions of this application; the information contained and included within is true, complete, and correct; and to the best of my knowledge and belief, I am eligible to receive this Scholarship as defined by the Charlotte Lemons Annual Student Scholarship (C.L.A.S.S.) Program of the Make A Difference Foundation, Inc.

Applicant Signature

Date

Parent Signature

Date