



## **Project Unify Scholarship**

This scholarship is offered to any Adrian High School senior who has been an active member of Project Unify.

### Requirements:

- 1) Adrian High School senior involved in Project Unify for at least two years.
- 2) 2.5 grade point average (or above)
- 3) Write and submit a 250-word essay on how Project Unify has impacted you.

# Adrian High School Scholarship Application

Common application for ALL Adrian High School Scholarships

Be sure to submit all necessary documentation listed below. Incomplete applications will not be considered. Submit a SEPARATE common application and documentation for EACH SCHOLARSHIP.

Applicant's Name: \_\_\_\_\_

Parent Names \_\_\_\_\_

Parent Employer(s) \_\_\_\_\_

Number & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Home phone number \_\_\_\_\_ Student cell phone \_\_\_\_\_

Planned course of study \_\_\_\_\_

Are there additional sources of financial support anticipated to fund your college education? YES NO

**Attach to this application a copy of the following in the order listed: DO NOT STAPLE**

- Current High School Grade Transcript
- College Acceptance Letter
- Activities resume (including awards, volunteer, work and school activities, and community service)
- 2 Letters of recommendation from faculty, administration or a responsible community person (not related to the applicant), unless a different request is stated for a specific scholarship. **Review each scholarship for "specific requirements"**.
- Brief written essay explaining "Why I think I should be the recipient of this scholarship" *unless* a different request is stated for a specific scholarship. **Review each scholarship for "specific requirements"**.

**Return Completed Application and Additional Material (if required)**

**to the Counseling Center by Monday April 13, 2020 at 3pm**

**I authorize the release of my high school grades, test scores, and other pertinent information in my high school file to the Selection Committee.**

*I understand that this scholarship, if granted to me, is for pursuing the course of study at the college/university stated in the application. If for any reason my plans change before beginning my freshman year, I will inform the Scholarship Committee/AHS Business Office by letter. At that time the Scholarship Committee/AHS Business Office will have the right to reevaluate my application and revoke my scholarship.*

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_

A separate packet is needed for each scholarship.