



## Scholarship Application

Harford County Education Foundation provides critical tools and resources so all students, with an emphasis on vulnerable youth, can achieve personal success.

This scholarship application is open to all students attending Harford County Public Schools. Questions can be emailed to [connect@harfordeducation.org](mailto:connect@harfordeducation.org).

### Eligibility Requirements

Before submitting application, all applicants must meet the following eligibility criteria.

- Graduating from a Harford County Public School
- Enrolled in rigorous coursework and maintain a 2.5 GPA
- Maintain a high attendance rate
- Participate in community service
- Recipients of scholarship must agree to submit a short letter about college life and unofficial transcript from college after completing one year.

### Instructions for Submitting Application

All scholarship applications must submit the completed application and the following:

1. Unofficial Harford County Public School High School Transcript (include attendance and fourth year grades through 2<sup>rd</sup> quarter)
2. Personal Statement/Essay stating (1) career goals; (2) community service; and (3) leadership skills used in school and/or community, (4) high school activities, ie clubs, sports, honors. Minimum 500 words, Times Roman, 12 pt. font, double space.
3. Letter of recommendation from a school counselor and/or teacher
4. Letter of reference from one community member.
5. FAFSA Form Confirmation Page

**Applications are due by April 17, 2020.**

Do not staple application. Late applications will not be accepted.

Completed applications with ALL required documentation should be mailed to:

**Harford County Education Foundation  
260 Gateway Drive, Suite 21A  
Bel Air, MD 21014**

**HARFORD COUNTY EDUCATION FOUNDATION  
SCHOLARSHIP APPLICATION  
YEAR 202\_\_**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_

Email address \_\_\_\_\_

School Counselor Name \_\_\_\_\_ Email \_\_\_\_\_

Do you agree to submit a follow up essay and transcript one year after receiving the scholarship award? HCEF is interested in your continued success. \_\_\_\_ Yes \_\_\_\_ No

**Education:**

Name of Elementary School you attended \_\_\_\_\_

Name of Middle School you attended? \_\_\_\_\_

Name of High School you attended? \_\_\_\_\_

Which school of higher education have you been accepted into? \_\_\_\_\_

What is your program of study or educational goal? \_\_\_\_\_

Are you a first generation college bound student? \_\_\_\_ yes \_\_\_\_ no

Do you qualify for the Free and Reduced Meals Program? \_\_\_\_ yes \_\_\_\_ no

Please describe type and amount of any financial assistance: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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