



Washington State Governors' Scholarship for Foster Youth Application
Deadline: Postmarked by November 10, 2009

Scholarship Eligibility:

Please read all statements below and check the box. If you are unable to check all boxes, you are not eligible to apply for this scholarship. If you have any questions regarding these requirements please contact the College Success Foundation.

Choose One

I am currently, **or** was until emancipation in state recognized care—a dependency court order resulted from intervention by Washington State on your behalf.

OR

I am currently, **or** was until emancipation in federally-recognized care—you are classified by the United States Government as an unaccompanied minor refugee, are a legal permanent resident, and are in legal care (or were in care until your emancipation) of a private non-profit agency in Washington State

OR

I am currently, **or** was until emancipation in tribal-recognized care—your placement is under jurisdiction of the tribal court.

I am a senior at a Washington State high school and will graduate with a high school diploma (not a GED) during the 2009-10 academic year.

I have a cumulative high school grade point average of 2.0 or above.

I will have resided in Washington State for three academic years prior to graduating from high school.

I plan to enroll in college full-time and complete a program of study at an eligible Washington State college.

Scholarship Information

- Approximately thirty new scholars are chosen each year.
- Scholarship award amounts range from \$2000 to \$4000 depending on the college of attendance.
- Scholarships can be used up to five years until completion of the student's program of study. Students must be enrolled full-time and maintain satisfactory academic progress in order to renew scholarships each year.

Scholarship Return

Mail the following to Governors' Scholarship; 1605 NW Sammamish Rd. Ste 200; Issaquah, WA. 98027.

- Completed application
- Essay Questions
- Letter of Recommendation
- High School Transcript(s)
- Copy of your Ward of the Court Papers

Applicants will be notified regarding whether or not they received this scholarship by January 1, 2010. For more information or to download the application, visit www.collegesuccessfoundation.org/gs. With questions, call 1-877-655-4097 or email hseivert@collegesuccessfoundation.org.

**Washington State
Governors' Scholarship for Foster Youth
Application**

Mail Application to:

**Governors' Scholarship for Foster Youth
College Success Foundation
1605 NW Sammamish Rd. Suite 200
Issaquah, Wa. 98027**

**Fall 2010
Deadline: Postmarked November 10, 2009**

Documents to Complete and Mail

- | | |
|---|--|
| <input type="checkbox"/> Application | <input type="checkbox"/> Personal Recommendation |
| <input type="checkbox"/> Essay Questions | <input type="checkbox"/> Enclosed or |
| <input type="checkbox"/> Copy of the Ward of the Court Papers | <input type="checkbox"/> Date Requested |
| <input type="checkbox"/> High School Transcript: | |
| <input type="checkbox"/> Enclosed or | |
| <input type="checkbox"/> Date Requested: _____ | |

**Note: Your application will not be complete until all
of these documents are received.**

Additional Funding Request

By initialing or checking below I give the College Success Foundation permission to send this application to the organizations that are listed.

_____ I request that the College Success Foundation send a copy of this application to the Higher Education Coordinating Board so my eligibility for the Passport to College Program may be determined.

_____ I request that the College Success Foundation send a copy of this application to the Department of Social and Health Services so my eligibility for the Education and Training Voucher Program may be determined.

Application Instructions

**Complete this form neatly using black or blue ink only.
Answer all of the questions or mark N.A for "not applicable".**

Part One – Applicant Information

First Name: _____ Middle Name: _____ Last Name: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Home Phone: (____) ____ - ____ Cell Phone: (____) ____ - ____ E-mail: _____

Date of Birth (MM/DD/YYYY): _____ Country of Birth: _____ Age: _____

Social Security #: _____ - _____ - _____ Gender: Male Female

Social Worker First Name: _____ Last Name: _____

Social Worker Phone: (____) ____ - _____

Total time spent in foster care: _____ year(s) _____ month(s)

Current type of placement: Foster Home Group Home Relative Residential facility Other _____

Please provide alternative contact information for an adult who stays in contact with you:

First Name: _____ Last Name: _____ E-mail: _____

Relationship to Applicant: _____ Do you reside with this adult contact? Yes No

Home Phone: (____) ____ - ____ Cell Phone: (____) ____ - ____ Other Phone: (____) ____ - ____

The following questions are collected for research and program development purposes:

Are you a U.S. Citizen? Yes No If no, are you a legal permanent resident? Yes No

Alien Registration # _____

Ethnicity (how you best describe yourself; please read all choices and choose only one):

- African American Indian* Asian, Asian American Pacific Islander
- Black American White or Caucasian Hispanic – of European ancestry
- Hispanic/Latino—of Mexican, Central or South American or Caribbean (Cuban, Puerto Rican, Dominican) ancestry
- Multi-Racial (please specify) _____ Other (please specify) _____
- *Tribal Affiliation (if applicable): _____

Part Two– Enrollment Information

Cumulative High School Grade Point Average: _____ Expected High School Graduation Date: (MMDDYYYY) _____

If you will be graduating earlier than spring of 2010, please explain _____

High School: _____ High School Principal: _____

High School Mailing Address: _____ City: _____ State: _____ Zip: _____

Please list the colleges or programs in which you are interested and plan to apply to for admission:

- College _____ Anticipated field of study _____
- College _____ Anticipated field of study _____
- College _____ Anticipated field of study _____

Intended Major: _____

Please identify the final college degree/ certificate you expect to receive:

- Bachelor Degree Associate Degree Voc/technical Certificate Other _____

Part Three– Development Activities

Extracurricular, personal and volunteer activities (including those completed during the summer)

If applicable, list your principal extracurricular, religious, community, and family activities and hobbies in the order of their interest to you. Include specific events and/or major accomplishments.

Activities	Positions held, honors won or letters earned	Length of time

Paid Work Experience/Student Income Information

If applicable, list any job (including summer employment) you have held during the past three years.

Specify Job and nature of work	Employer	Approximate Dates of employment	Approximate # of hours per week

Part Four– Essay

Please write two essays making sure to address each of the questions. Each essay should be a minimum of 200 words and a maximum of 300 words. Please type your essays on a separate sheet of paper. Include your name and date of birth at the top right corner of each page.

Essay 1: Explain your interest in college and where you think it may take you. What have you done to prepare yourself to pursue your higher education?

Essay 2: Describe a significant challenge you have faced that illustrates your perseverance. How did you deal with that challenge? How did you persist toward your academic goals in the face of that challenge? Explain how having dealt with that challenge has shaped who you are today and influences your educational and career plans for the future.

Part Five – Personal Letter of Recommendation

Applicant:

For the Personal Recommendation, you should choose an adult who has insight into your personal character. A good option may be a counselor, social worker, coach, pastor, employer, teacher who knows you particularly well, etc. **Relatives, foster parents or foster family members, spouses, boy/girlfriends or peers are not acceptable for a personal recommender.** Please make sure the person you select as your personal recommender feels comfortable giving you a positive recommendation.

First Name: _____ Last Name: _____ Phone Number: (____) _____ - _____

Applicant's Address: _____ City _____ State _____ Zip _____

Applicant's signature: _____ Date: _____

Recommender:

The applicant named above is applying to the College Success Foundation for a Governors' Scholarship for Foster Youth Scholarship.

We are asking for your input about the applicant in two ways:

- A) Rate the applicant in respect to eight specific traits by filling out the grid on the second page.
- B) Write a Letter of Recommendation which addresses each of the three criteria below.
 1. Resiliency – the ability to persist toward educational goals in the face of challenges.
 2. Openness to receive support – the willingness to seek and use support from others when needed to navigate through educational obstacles.
 3. Educational and career goal-setting – the ability to set educational and career goals and take intermediate steps to reach these goals.

PLEASE MAIL BOTH PAGES AND YOUR RECOMMENDATION TO:

**College Success Foundation
Governors' Scholarship for Foster Youth
1605 NW Sammamish Rd. Suite 200
Issaquah, Wa. 98027**

THANK YOU FOR YOUR ASSISTANCE! WE APPRECIATE YOUR TIME AND THOUGHTFUL ANSWERS!

Recommender First Name: _____ Recommender Last Name: _____

Phone Number: (____) _____ - _____ Place of Employment: _____

Position: _____ Email Address: _____

I have known the applicant for a total of _____ year(s) _____ month(s)

In what capacity have you known the applicant? _____

My signature on this form certifies that all statements contained in the attached statement are accurate and complete to the best of my knowledge, and that I am not a family member, significant other, classmate, or peer of the applicant.

Recommender Signature

Date Signed

Trait	No Knowledge of this Trait	Extremely Weak	Needs Improvement	Average	Well above average	Exceptional (top 10%)	One of the top few people I have encountered
Positive Self-Concept							
Student demonstrates self-awareness, strength of character, determination and independence.							
Realistic Self Appraisal							
Student demonstrates the ability to recognize her/his strengths and deficiencies , and works hard at self-development.							
Long-Term Goal Setting and Follow Through							
Student demonstrates the ability to plan ahead, set goals, and work toward these goals though gratifications may have to be deferred.							
Navigating Social Systems							
Student demonstrates and awareness of how her/his social systems work, and how s/he can get things done even if s/he is at a disadvantage because the system has been designed by others. Despite any challenges, the student acts positively, effectively, and assertively to move forward.							
Willingness to Use Support Systems							
Student demonstrates the ability and willingness to turn to a mentor or other strong support person for encouragement in a crisis.							
Community Service							
Student demonstrates an awareness of the world beyond her/his needs through participation in community involvement projects and overall involvement with the community, or assists in meeting her/his own family needs.							
Leadership Potential							
Student demonstrates positive leadership in some area of her/his life (e.g. family, work, religious, sports, community, academic, or non-educational groups)							
Intellectual Curiosity							
Student possesses zeal for learning that is demonstrated in her/his development of an interest area outside the regular curriculum—perhaps concerning her/his cultural background or involving culturally derived ways of learning.							

Part Six – Application Pledge and Release of Information

By my signature below I pledge that:

- The statements made and circumstances represented throughout this application for the Governors' Scholarship for Foster Youth are truthful to the best of my knowledge.
- The essays accompanying this form are substantively my own work, although they may have been reviewed by teachers or other advocates.

By my signature below I understand and agree that:

- If at any time information provided in this application is found to be false or inaccurate, it is sufficient cause for rejection or dismissal from the Governors' Scholarship for Foster Youth.
- Prior to the Governors' Scholarship for Foster Youth selection, CSF staff may be in contact with school officials to confirm that the applicant's school attendance and conduct have been at the high level expected by the program. This information may be taken into consideration in the selection process.
- The information submitted in this application will be reviewed by College Success Foundation (CSF) staff and outside consultants for the purposes of selection.
- One of the outcomes of the Governors' Scholarship for Foster Youth program is to increase knowledge regarding higher education opportunity through research, and the applicant may be contacted by outside consultants in the future and asked to participate in research surveys whether or not they are selected for the scholarship.
- In order to determine an appropriate award amount and/or to determine my continuing eligibility for an award, CSF may need to discuss my application and the information in my application with other organizations, including the Department of Social and Health Services, the Higher Education Coordinating Board, and Independent Living Programs, as well as with the admissions, financial aid and student service offices at any college, university or vocational or technical program which I attend or to which I may be applying for admission. I agree to this exchange of information about me.

By my signature below I consent to:

- Give permission to the Department of Social and Health Services to provide verification of my foster care status.
- The use of any and all information from this application in connection with CSF research activities. The applicant's individual transcript and other information will not be made available to the public through CSF research activities in a form that would allow the applicant to be identified, although research results may be made available to the public in an aggregated form, such as an average or a total for a group of students.
- Irrevocably give CSF the right to use my name, picture or likeness for any program or CSF purpose.

Applicant Name (please print)

Applicant Signature

Date