

B-BRAVE MCMAHON/STRATTON SCHOLARSHIP FUND Application Guidelines

The ***B-BRAVE (Bravery-Belief, Resiliency, Attitude, Value, Excellence) McMahon/Stratton Scholarship Fund*** was established by family and friends to honor a student that has believed in her/himself, and has demonstrated exceptional bravery, resilience, a winning attitude and strong and steadfast values that in return have resulted in personal excellence. This individual has ultimately overcome the odds and excelled.

Purpose: One scholarship will be awarded to a graduating senior from any Lycoming or Clinton County High School, and is designed to provide financial assistance to graduates who have been in the foster care system or have legal adopted status and have shown remarkable achievement in spite of the obstacles in their life.

Application Process: An application with these guidelines can be obtained from any Lycoming County or Clinton County High School Guidance Office or the Williamsport Lycoming Community Foundation.

- Submit a completed application form;
- Attach an essay (not to exceed 2 pages) explaining the value of family **or** how you overcame adversity in your life **or** describe one person who has made a difference and helped you to succeed;
- Provide proof that applicant has been accepted to an accredited two- or four-year college or university, preferably in Pennsylvania;
- Provide at least one letter of reference;
- Include High School Transcript.

Application Deadline & Address: Applications and requested materials are to be returned no later than **April 30** to the Williamsport Lycoming Community Foundation, 330 Pine Street, Suite 401, Williamsport, PA 17701.

Scholarship Selection Process: The Williamsport Lycoming Community Foundation Scholarship Selection Committee will select scholarship recipients.

Complete Criteria:

- Recipient will be a graduating senior from a Lycoming County High School or Clinton County High School that has believed in her/himself and has demonstrated exceptional bravery, resilience, a winning attitude, and strong and steadfast values that in return have resulted in personal excellence;
- Recipient must be accepted into a full-time continuing education program, preferably in Pennsylvania;
- Recipient has been in the foster care system or have legal adopted status;
- Recipient has ultimately overcome the odds and excelled;
- Recipient will have exhibited good citizenship and have no known drug or alcohol record or juvenile offences;
- Recipient will also have unmet financial need;
- Recipient must show evidence that they have a current minimum GPA of 2.8

Scholarship Awards Disbursement: One (1) scholarship will be awarded annually. Scholarship award payments will be paid directly to the college or university where the recipient will be attending.

B-BRAVE MCMAHON/STRATTON SCHOLARSHIP FUND APPLICATION

Complete the application providing as much detail as possible.

NAME CIRCLE ONE (MS. / MR.) _____

ADDRESS _____

CITY, STATE ZIP _____

HOME PHONE _____

CELL PHONE _____

E-MAIL _____

HIGH SCHOOL _____

GRADUATION DATE _____

SOCIAL SECURITY NUMBER _____

PARENTS' HOME PHONE _____

PARENTS' CELL PHONE _____

PARENTS' E-MAIL _____

AREA OF STUDY _____

1. Name and address of college where accepted. Please provide proof of acceptance into a full-time undergraduate program at an accredited institution (college/university).

Latest total gross annual family income \$ _____

Amount of anticipated family support for your first year of college/university education \$ _____

Amount of financial aid from sources other than family to be applied to your first year college/university expenses (I.E. grants, loans, Job, other partial scholarships, etc.) \$ _____

Estimate of your total first year college/university expenses \$ _____

List other family members in post-secondary education _____

2. Attach an essay, not to exceed two (2) pages, explaining the value of family **or** how you overcame adversity in your life **or** describe one person who has made a difference and helped you to succeed.
3. Include a list of your school and/or community involvement.
4. Include one letter of reference.
5. Include school transcript indicating GPA.
6. Do you have legal adopted status or have you ever been in the foster care system? Yes/No _____

Financial Information/Certification
Signatures are required

I hereby affirm that the information on this form is true and complete to the best of my knowledge. I am aware of the conditions under which the awards are made and promise to inform the Williamsport Lycoming Community Foundation of any change in circumstances.

I understand that tax return forms provide information to be used in the consideration of finalists for awards made by the Williamsport Lycoming Community Foundation. The information submitted is held in strictest confidence.

I hereby authorize the Williamsport Lycoming Community Foundation to share this information with members of the Scholarship Committee.

APPLICANT'S SIGNATURE

PARENT OR GUARDIAN'S SIGNATURE

DATE

DATE

Return to: Williamsport Lycoming Community Foundation by **April 30**
330 Pine Street, Suite 401
Williamsport, PA 17701

Questions: Contact the High School Guidance Office
or Betty Gilmour, Program Officer, at the Williamsport Lycoming Community Foundation
Phone (570) 321-1500
E-mail bettyg@fcfpa.org