

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 Deadline & Address: Applications and requested materials are to be returned no later than **April 15** to:

Williamsport Lycoming Community Foundation
Attn: Program Officer
330 Pine Street
Suite 400
Williamsport, PA 1770

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. Average award amount is \$250. Scholarship award payments will be paid directly to the college or university where the recipient will be attending. Scholarship availability and award amount is subject to change yearly.

Questions please contact: Your high school guidance officer or
Betty Gilmour, Program Officer, Williamsport Lycoming Community Foundation
Phone 570.321.1500
E-mail bettyg@fcfpa.org

B-BRAVE McMahon/Stratton Scholarship Fund Application

Applications must be submitted to the Williamsport Lycoming Community Foundation, postmark deadline April 15

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 _____

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 _____

- A copy of your FAFSA application must be included;
- 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;
- List your school and/or community involvement;
- Provide proof of acceptance to an accredited two- or four-year college or university, preferably in Pennsylvania;
- Attach a copy of your high school transcript;
- Attach at least one letter of reference.

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