

ADVOCATES FOR YOUTH EDUCATION, INC.

2025 SCHOLARSHIP APPLICATION PROCEDURE AND GUIDELINES

I. Statement of Purpose:

The purpose of the Advocates for Youth Education, Inc. Scholarship is to provide financial assistance to deserving youth in the Greater Cincinnati-area. It is hoped that the scholarship will promote achievement and encourage exceptional youth to seek professional and technical careers.

- II. Eligibility Requirements Applicants for each scholarship must be:
 - a. A citizen of the United States living in the Greater Cincinnati-area.
 - b. A graduating high school senior entering a four-year accredited college in the fall after their graduation for undergraduate study.
 - c. A GPA of 2.5 or above on a 4.0 scale and a SAT score not less than 1200 or ACT score not less than 18.
 - d. Recipients must show involvement in school/community leadership and volunteer service during their high school years.
 - e. A student with financial need for tuition and other college expenses.
 - f. A good citizen with good attendance in their school.
- III. **Application Procedures** Each applicant must complete all parts of the application and must also provide:
 - a. A 250-words or less statement on the applicant's future goals.
 - b. A 250-words or less statement by the applicant's parent or guardian.
 - c. An <u>official</u> transcript including this year's first semester grades, class rank, GPA (unweighted), and ACT/SAT test scores.
 - d. Two letters of recommendation from your counselor, teacher, advisor, administrator, minister, or employer.
 - e. The complete package of application materials is due *no later than February 28, 2025*.

<u>CONFIDENTIALITY</u>: All applications will be viewed only by the Scholarship Selection Committee members and will be destroyed after the annual scholarship selection process has been completed.



Advocates for Youth Education, Inc. Scholarship Application

This is a fillable form. Please type your responses in the fields below.

PERSONAL INFORMATION (Please print) Name: (Middle I.) (Last) (First) Address: _____City: _____ (Number) (Street) State: ____ Zip: ___ Telephone Number: ____ Email Address: ____ Gender: ____ Church or Religious Affiliation: Date of Birth: Applicant lives with (circle one): Mother & Father, Mother, Father, Grandparent(s), Mother & Stepfather, Father & Stepmother, Other(s) Number of sibling(s) in your home: Age(s) of sibling(s): _____, ____, ____, ____, Are you the first in your family to attend college? \square Yes \square No How did you find out about this scholarship? **EDUCATION INFORMATION** Name of your high school: Class Rank after 1st semester 09/19)? _____ out of /____ G.P.A. ____ (unweighted) Test Scores: ACT SAT Have you passed all parts of the Ohio Graduation Test? \square Yes \square No

Are you a National Merit Finalist or Semifinalist? ☐ Yes ☐ No



PARENT/GUARDIAN INFORMATION

Mother's Name	Father's Name	Guardian's Name	
Occupation	Occupation	Occupation	
Workplace	Workplace	Workplace	
Annual Income	Annual Income	Annual Income	
APPLICATION DATA			
	ourses or special academic cou ecent course or program first.	urses you have tal	ken during
Course or Program	Name of School or Site	Dates Attended	Length of Course
List Any Community Servic	re:		
Volunteer Activity	Hours Volunteered	Years(s) of Service	



List School/Community Activities:

Activity	Year(s) of Participation	Office Held
ist Any Jobs:		
Job Description	Name of Employer	Length of Employment
ist Any Awards or Honors Yo Kind of Award	ou Have Received: Name of Agency/ Organiz Granting Award	ation Year Received
	needs awards or grants? □ Yes [
yes, picase list.		
COLLEGE PLANS		
lease list all of the colleges th	at you have applied to (list in ord	ler of choice).
2.		
What is your intended major?		



FINANCIAL AID

r the following?	
es □ No Oth	er Scholarship(s): Yes No
to either of the above ☐ Yes ☐ No	e, have you received any aid or
es, please list them be	low.
owing:	
sification of any infornsideration for this so	rmation provided in this application will cholarship.
	Date
pplication with all red by February 28th, 20	quired documents and 025 to:
holarshipscincy@gma	<u>il.com</u>
Wagner Kennedv. Ph	nD
Winford Ct.	
	owing: sification of any informsideration for this so plication with all recept February 28th, 20 molarshipscincy@gma Wagner Kennedy, Ph

Thank you for your interest in our scholarship program. Whether you are selected for an AYE scholarship or not, we wish you much success in your college career!

Phone: 513-309-5890