**The Roanoke Chapter of the Girl Friends, Inc.**

 **Mrs. Carolyn Patterson, President**



December 7, 2020

Dear Scholarship Candidate:

The Roanoke Chapter of the Girl Friends, Inc. is pleased to announce the Girl Friends Memorial Scholarship.

The chapter is seeking high-achieving, African American youth who plan to attend a community college or four year accredited institution of higher education. Our Chapter believes that education is the key to success in life and we want to make a difference in the lives of the students in Roanoke, Salem, Lynchburg, Botetourt and the New River Valley. Every year we award a **$750.00** scholarship to the student who best fits our criteria.

Scholarship applications and supporting documents must be postmarked by **February 1, 2021**.

Applicants must meet the criteria as indicated on the attached application.

(***Please note: Any application received without these items will not be considered.)***

The application and relevant documents are enclosed. **Please see the attached sheet for details on how applications will be scored.**

Thank you for your interest.

Sincerely yours,

Thelma T. Haynesworth

Patricia Henry

Thelma T. Haynesworth, Scholarship Chair

Patricia Henry, Girl Friends Fund Liaison

­Roanoke Chapter of the Girl Friends Inc. Scholarship Application

HE Roanoke Chapter of Girl Friends

**THE GIRL FRIENDS INC. MEMORIAL SCHOLARSHIP**, sponsored by the Roanoke Chapter of The Girl Friends, Inc. is to assist high-achieving, African American students who plan to attend a community college or four year accredited institution of higher education. This $750 scholarship award will assist a student with the cost of tuition, books and/or other mandatory fees.

 \*\*\*\*\*\*\*\*\*\*

 **PLEASE TYPE ALL INFORMATION**

**Applicant’s Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Birth Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of Parent(s) or Guardian** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of high school** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Graduation Date \_\_\_\_\_\_\_\_\_\_\_

**Cumulative GPA**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**College you plan to attend**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Intended College Major**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Minor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Parent(s)/ Guardian** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_

**Signature of Applicant** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_

Return this scholarship application with all supporting documents postmarked by **February 1, 2021** to:

 **Thelma T. Haynesworth**

**6510 Fairway Forest Drive**

**Roanoke, VA 24018**

The Roanoke Chapter of the Girl Friends, ®Inc. Scholarship Application

**ELIGIBILITY REQUIREMENTS:**

*Scholarship applicants must meet the following:*

* Be a citizen of the United States
* Is a graduating high school senior planning to attend a local community college or a four year accredited institution of higher learning.
* Have a minimum grade point average of 2.5

**ALL APPLICATIONS MUST BE POSTMARKED BY February 1, 2021**

**PLEASE ATTACH THE FOLLOWING:**

1.A 4 x 6 color photo of yourself (head shot only)

2. An essay (max 250 words) which should include your future goals and why

you feel you are deserving of this scholarship.

3**. An academic resume which includes academics, extracurricular and community activities, leadership roles, honors and awards, and work history**

4. A letter of recommendation in a sealed envelope **and** a recommendation from your counselor (**Form included).** **Recommendations from relatives will not be accepted**

4. Copy of official high school transcript with GPA

5. Completed **typed** scholarship application

6. Complete Confidential Financial Information form.

**(*Please note: Any application received without these items will not be considered.)***

**All applications will be scored based on the criteria listed below:**

**GPA: 0 – 4 points**

**Academics (strength of curriculum): 1 - 2 points**

**Extracurricular and/or community activities: 0 – 4 points**

**Honors/Awards: 0 – 3 points**

**Work Activities: 0 – 2 points**

**Recommendation: 0 – 3 points**

**Essay: 0 – 3 points**

**Extenuating Financial Factors: 0 – 4 points**

 **(Number of dependents, number in college,**

 **foster care, loss of family employment, excess**

 **medical expenses, etc.)**

**Send completed typed application and all supporting documents to:**

**Thelma T. Haynesworth**

**The Roanoke Chapter of the Girl Friends, Inc.**

**6510 Fairway Forest Drive**

**Roanoke, VA 24018**

The Roanoke Chapter of the Girl Friends, ®Inc. Scholarship Application

Statement of Recommendation

Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This student has applied for a scholarship from The Roanoke Chapter of the Girl Friends, Inc. Please complete the following to the best of your ability.

**This form must be returned by the applicant in a sealed envelope along with your application no later than February 1, 2021. Mail to address indicated on the application.**

Person recommending student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Please use the scale below as a guide to evaluate this applicant in the areas indicated:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Unable to evaluate | ClearlyOutstanding | ExceedsExpectations | Fully Satisfactory | Needs Improvement | Clearly Unsatisfactory |
| AcademicAchievement |  |  |  |  |  |  |
| Cooperation andAttitude |  |  |  |  |  |  |
| Dependability |  |  |  |  |  |  |
| Efficiency and Organization |  |  |  |  |  |  |
| Initiative |  |  |  |  |  |  |
| Integrity |  |  |  |  |  |  |
| Interpersonal Relations and Communications |  |  |  |  |  |  |
| LeadershipAbilities |  |  |  |  |  |  |

 Additional Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_

**CONFIDENTIAL FINANCIAL INFORMATION**

In order to distribute the award in the most equitable manner, the applicant’s need for financial aid must be carefully evaluated. If you are independent (emancipated) from your parents, please give your own income. Please note that all spaces must be marked. If they are not applicable, mark them as such. Feel free to present further details on a separate sheet of paper.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Name | Occupation | Person(s) Residing inthe Home? |
|  Self |  |  |  |
|  Father |  |  |  |
|  Mother |  |  |  |
|  Guardian |  |  |  |

Total Annual Gross Income \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Indicate the number of persons dependent upon the above income. Include parents, dependent children and others as reported on income tax return.

|  |  |
| --- | --- |
| **Name** | **Age** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

Number of persons listed above who are currently receiving training beyond high school\_\_\_\_\_\_\_\_

How are these students being financed? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide extenuating circumstances not given above that further shows your need for financial assistance \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Girl Friends- $750 Scholarship Evaluation Form**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Applicant Name** |  |  |  |  |
| G.P.A. (0 – 4 pointsGreater than 4.0 = 4pts.3.6 – 4.0 =3 pts.3.0 – 3.5 = 2 pts2.7 – 2.9 = 1 pt  |  |  |  |  |
|   |  |  |  |
| **ACADEMICS** ( 1 – 2 Points)Accelerated and/or college courses = 2 ptsCollege Prep courses = 1 pt |  |  |  |  |
|  |  |  |  |
| **EXTRACURRICULAR AND/OR COMMUNITY** ACTIVITIES (0 – 4 points)Extreme involvement = 4 pts Strong involvement = 3 pts Average involvement = 2 ptsLittle Involvement=1 No involvement=0 |  |  |  |  |
|  |  |  |  |
| **HONORS & AWARDS** ( 0 – 3 Points)Much recognition = 3 pts Average recognition = 2 ptsLittle recognition=1 pt No recognition = 0 |  |  |  |  |
|  |  |  |  |
| **WORK ACTIVITIES** ( 0 – 2 POINTS)Extraordinary work history = 2 ptsGood work history = 1 ptLittle or no work history = 0 |  |  |  |  |
|  |  |  |  |
| **RECOMMENDATIONS** ( 0 – 3 Points)Outstanding = 3 pts Strong = 2 pts Average= 1 No recommendations = 0 |  |  |  |  |
|  |  |  |  |
| **EXTENUATING FINANCIAL FACTORS** (0 – 4 Points)Does the applicant report any extenuating factors such as # of dependents, # of dependents/parents currently in college, foster child situations ,medical conditions/expenses, eldercare issues, loss of employment, etc.Extreme circumstances = 4 pts Serious circumstances = 3 pts Moderate circumstances = 2 ptsMinimum Circumstances = 1 ptNo circumstances= 0 |  |  |  |  |
|  |  |  |  |
| **ESSAY** ( 0 – 3 Points)Well written, compelling = 3 points  Average = 2 points Poorly written = 1 pt No essay included = 0 |  |  |  |  |
|  |  |  |  |
| **Total** |  |  |  |  |

**Evaluator’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**