



**Assistance League®  
of Greater Placer  
Scholarship Program**  
P.O. Box 4593  
Auburn, CA 95603

**Announcement to 2020 Graduating Seniors  
Assistance League® of Greater Placer Scholarships for Koinonia  
Family Services and for the following Placer County Continuation  
Schools including CONFLUENCE, MAIDU, ADELANTE,  
INDEPENDENCE, VICTORY, AND RICA**

Assistance League of Greater Placer is pleased to announce scholarships for graduating high school students who are committed to higher education and who require financial assistance. Applicants will be accepted from Koinonia Family Services and from the following continuation schools: Confluence, Maidu, Victory, Rocklin Independent Charter Academy (RICA), Independence, and Adelante.

**Purpose:** Each year scholarships will be awarded to support students continuing their education. The basis for the award is:

- Academic (minimum 2.0 GPA) and extracurricular achievement
- Community involvement
- Financial need

**Financial Assistance:** Assistance League of Greater Placer pays scholarship funds directly to the recipient's college, university or trade school to cover tuition and related educational expenses. The number of scholarships may vary each year based on available funds. Scholarship recipients must agree to the terms as outlined in this announcement. Scholarship funds typically are not available until after the academic year begins, so students must plan accordingly.

**Criteria:**

- Student must have a High School Diploma or a General Equivalency Diploma (GED) to receive a scholarship.
- High school students must be attending a high school in Placer County.
- Applicants must be accepted into a college or trade school and must take a minimum of 9 units at a college or university, or be enrolled in a trade school program for the equivalent of 9 units for the upcoming academic year.
- Applicants must demonstrate a need for financial assistance.

**Application deadline is May 8, 2020.**

In addition, after the application has been accepted, Assistance League committee members will contact students for personal interviews. Decisions will be announced at the end of May. Students will be informed of the decisions at the graduation ceremony or by phone or email.

**Scholarship Awards:** Assistance League of Greater Placer awards scholarships on the basis of a comprehensive process. Areas that are reviewed by the Scholarship Committee include but are not limited to the following: academic accomplishments (minimum 2.0 GPA), community service, references, personal essays, and financial need.

**Ongoing scholarships may be available if the scholarship recipient fulfills the following requirements:**

1. Student must maintain academic standards specified below and provide documented evidence each term.
2. Deadlines for submitting will be determined based on the educational institution's calendar.
3. Requirements for each term:
  - a. Student must maintain a GPA of 2.0 or greater.
  - b. Student must carry at least 9 units or the equivalent at the college or trade school.
  - c. Student must provide proof of enrollment.
  - d. Student must be willing to communicate with an Assistance League mentor throughout the year regarding the educational process.

**Please contact Gayle Gullans, Scholarships Chair, with any questions.**

**510-378-4453 or [scholarships@algreaterplacer.org](mailto:scholarships@algreaterplacer.org)**



**ASSISTANCE LEAGUE® OF GREATER PLACER  
2020 SCHOLARSHIP APPLICATION  
FOR KOINONIA FAMILY SERVICES AND FOR CONTINUATION SCHOOLS  
CONFLUENCE, MAIDU, ADELANTE, INDEPENDENCE, VICTORY, AND RICA**

Please **type on a separate sheet** or **print** your answers below. Please include a recent photo of yourself with the application. **If the application is illegible or incomplete, it will be returned.** If any question does not apply to you in this application, please put N/A in the space. ***Give your completed application including all of the requested attachments to your high school counselor/advisor by May 8, 2020.***

|   |   |   |
|---|---|---|
| 1   | Last Name:  | First Name:   |
| 2   | Mailing Address:<br>Street: _____<br>City: _____ State: _____ ZIP: _____  |   |
| 3   | Home Telephone Number: (    )   | Cell: (    )  |
| *Email address : _____<br>(*not school email) |   | <div style="border: 1px solid black; padding: 5px; text-align: center;">Preferred Method of Contact (circle one)<br/>TEXT   CELL   HOME   EMAIL</div> |
| 4   | Circle current continuation high school:<br><b>Koinonia   Confluence   Maidu   Adelante   Independence   Victory   RICA</b><br>Counselor _____ Teacher Advisor _____  | Number<br>of years<br>attended<br>HS:   |
| 5   | I will be attending the following college/university/trade school in the <u>Summer or Fall of 2020</u> :<br>Name of college/university/trade school: _____<br>_____<br>Street Address: _____<br>_____<br>City, State and Zip Code: _____<br>_____<br>Phone: _____ |   |

Please list the following information on a separate sheet if needed. You may type or write your answers.

|   |   |
|---|---|
| 6 | <p>Grade Point Average (GPA): _____ (On a 4.0 scale)<br/><b>Attach proof of GPA--your most recent official school transcript required.</b></p> <p><b>Date of Graduation</b> _____ <b>Type of Diploma</b> _____</p>  |
| 7 | <p><b>Contact information of parent (s) or legal guardian (s):</b></p> <p>Name of parent/legal guardian 1: _____</p> <p>Address of parent/legal guardian 1 if different from above:<br/>Street: _____ City: _____ State: ___ ZIP: _____</p> <p>Home phone of parent/legal guardian 1: _____</p> <p>Cell phone of parent/legal guardian 1: _____</p> <p>Name of parent/legal guardian 2: _____</p> <p>Address of parent/legal guardian 2 if different from above:<br/>Street: _____ City: _____ State: ___ ZIP: _____</p> <p>Home phone of parent/legal guardian 2: _____</p> <p>Cell phone of parent/legal guardian 2: _____</p>  |
| 8 | <p>What is the highest level of education of parent/legal guardian 1-<b>circle one below</b>:</p> <p>Elementary Middle School High School Trade School Years in college: 1 2 3 4 BA/BS Postgraduate</p> <p>What is the highest level of education of parent/legal guardian 2-<b>circle one below</b>:</p> <p>Elementary Middle School High School Trade School Years in college: 1 2 3 4 BA/BS Postgraduate</p>   |
| 9 | <p>The following information is requested because some donors and grants request this for funding. You are not required to provide this information, but are encouraged to do so.</p> <p>I identify my ethnicity as:<br/>(select all that apply)</p> <p><input type="checkbox"/> Asian <input type="checkbox"/> Native American<br/><input type="checkbox"/> Black/African American <input type="checkbox"/> Pacific Islander Other-specify below:<br/><input type="checkbox"/> Hispanic/Latinx <input type="checkbox"/> Prefer not to answer _____</p> <p>I have childhood experience with:<br/>(select all that apply)</p> <p><input type="checkbox"/> Homelessness <input type="checkbox"/> Emotional abuse <input type="checkbox"/> Physical abuse <input type="checkbox"/> Sexual abuse <input type="checkbox"/> Emotional neglect<br/><input type="checkbox"/> Physical neglect <input type="checkbox"/> Parent treated violently <input type="checkbox"/> Household substance abuse <input type="checkbox"/> Household mental illness<br/><input type="checkbox"/> Parental separation or divorce <input type="checkbox"/> Incarcerated household member <input type="checkbox"/> Prefer not to answer</p> |

|    |   |
|----|---|
| 10 | <b>EMPLOYMENT:</b> List any paying jobs including dates and length of employment.   |
| 11 | <b>EXTRA-CURRICULAR ACTIVITIES:</b> List school extra-curricular activities in which you have participated. Note leadership roles and dates.  |
| 12 | <b>ORGANIZATIONS:</b> List community organizations such as service, volunteer and religious organizations in which you are now active or have previously been active. Note leadership roles and dates.  |
| 13 | <b>RECOGNITIONS:</b> List important awards and recognitions received, <b>including any scholarship</b> and how much the scholarship will award to you. Include organizations presenting honor and date awarded.   |
| 14 | <b>MAJOR/SPECIALTY:</b> What do you plan to major in or specialize in as you continue your education? Why?  |
| 15 | <b>FINANCES:</b> How do you plan to pay for college? What resources are available to you?   |
| 16 | <p><b>PERSONAL ESSAY:</b> Please answer the following questions. Your response should be written or typed on a separate sheet of paper and submitted with your application. It should not be more than 300 words.</p> <ol style="list-style-type: none"> <li>1. <u><i>In your own words, explain what you feel has been your greatest challenge and how have you been able to deal with it.</i></u></li> <li>2. <u><i>What is the most important thing you want us to know about you?</i></u></li> <li>3. <u><i>What do you want to study and why?</i></u></li> <li>4. <u><i>Why do you want this scholarship?</i></u></li> </ol> |

|     |  |  |
|-----|--|--|
| 17  | <ul style="list-style-type: none"> <li>• The following items must be attached to this application in order for the application to qualify to be reviewed by the scholarship committee.</li> <li>• Your application will be returned to you if these items are not attached to this application. (No exceptions.)</li> <li>• Circle “YES” or “NO” to ensure each item is attached as required.</li> </ul> |  |
| YES | NO   | Two reference forms. Attach two letters of recommendation from non-family members (teachers, counselors, principal, community leaders) familiar with your community service and other activities and achievements. |
| YES | NO   | Proof of college acceptance or current student enrollment. A letter of college acceptance or program acceptance is required for interview.   |
| YES | NO   | Most recent <u>official</u> high school transcript.  |
| YES | NO   | One personal essay typed or written on a separate sheet of paper   |
| YES | NO   | Signed photo consent for Assistance League® of Greater Placer.   |
| YES | NO   | Recent photo of yourself.  |
| YES | NO   | Answers to questions 1-15..<br>I have answered N/A above for questions that do not apply to me.  |
| YES | NO   | Counselor checklist of required items for scholarship application.   |

**STATEMENT OF ACCURACY**

I affirm that all the above stated information provided by me to Assistance League of Greater Placer Scholarship Committee is true, correct and without forgery. **I understand that the selection committee will not consider an application if any information is missing. I also understand that applicants will be asked for a personal interview and that I will be contacted by the selection committee for this interview.**

***I understand that if chosen as a scholarship recipient, according to Assistance League of Greater Placer’s scholarship policy, I must be enrolled/registered at the post-secondary institution of my choice before scholarship funds can be awarded. I also understand that if chosen as a scholarship recipient I consent to communicate with members of the Assistance League of Greater Placer mentorship program.***

Signature of scholarship applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Applications must be submitted  
to your high school counselor/advisor by  
Friday, May 8, 2020.**



**Scholarship Program—Checklist of Required Items to be Completed by  
the School Counselor**

*The application, high school transcript, personal essay, two references, proof of acceptance, photo consent, recent photo, contact information, and this checklist must be included in the application packet.*

| Requirements   | Initials |
|--|----------|
| Scholarship application filled out completely and signed   |          |
| Official high school transcript  |          |
| Personal essay   |          |
| Two references   |          |
| Proof of college/university/trade school acceptance  |          |
| Photo Consent with recent photo of the applicant   |          |
| This checklist   |          |
| <p><b>Student's contact information</b></p> <p><b>Current address:</b></p> <p>Street: _____</p> <p>City: _____ ST _____ Zip code: _____</p> <p>Home phone: _____ Cell phone: _____</p> <p>E-mail: _____</p> <p>Parent/guardian cell: _____</p> <p>Parent/guardian email: _____</p> <p><b>Future address (if known):</b></p> <p>Street: _____</p> <p>City: _____ ST _____ Zip code: _____</p> <p>Home phone: _____ Cell phone: _____</p> <p>E-mail: _____</p> |          |



## Photo Consent

I give Assistance League® of Greater Placer permission to publish in print, electronic or visual format, the likeness or image of \_\_\_\_\_

I waive any rights of compensation or copyright ownership thereto.

Name of Participant: (please print) \_\_\_\_\_

Signature: \_\_\_\_\_

Name of Parent/Guardian (please print) \_\_\_\_\_  
(if applicable)

Parent/Guardian Signature: \_\_\_\_\_  
(if applicable)

Date: \_\_\_\_\_

Received by: (please print) \_\_\_\_\_

P.O. Box 4693  
Auburn, CA 95604-4693  
530-885-4397  
[www.assistanceleague.org/Greater-Placer](http://www.assistanceleague.org/Greater-Placer)