

P O Box 56363 Washington, DC 20040

www.theshefoundationinc.org

**Scholarship Application
High School/College Student**

Name: _____ Telephone #: _____

Address _____

Email Address: _____ HS/College _____

City _____ State _____

Classification: _____ Credits/Hours Earned: _____

Parent's Name _____ Telephone #: _____

Address: _____

Please list your G.P.A for the past year: _____

(*Please provide most recent copy of transcript)

Have you applied to or been accepted at a college or university _____ yes _____ no

If yes, please list your intended school _____

*A copy of the acceptance letter must be attached, if applicable

List any school/social organizations, activities, and academic achievements or awards

List any community service activities. Use separate sheet if additional space is required.

Please write a one-page type-written essay describing why you feel worthy of this scholarship and submit with this application.

How did you find out about the SHE Foundation, Inc. scholarship application? (Briefly)

Applicant Statement

I certify, to the best of my knowledge and belief, that the above statements given, truly, represent my background and experience. I therefore give permission to She Foundation, Inc. to investigate any given information on my background. I also give my employer and educational institution permission to provide the She Foundation, Inc., with requested information on my background.

Signature: _____ Date: _____

Photo/Video Release (Check One)

During this program photographs and videos may be taken of your child. This media may be used for promotional purposes in the Foundation's publications. At times, members of the news media or others associated with documenting our activities may also be present to take pictures or video.

Yes, I give permission for my child to be photographed or videoed while participating in this activity.

No, I do not give permission for my child to be photographed or videoed while participating in this activity.

PARENT/GUARDIAN NAME (PRINTED): _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

Please submit completed application to:

The SHE Foundation, Inc.

Scholarship Committee

P O Box 56363 Washington, DC 20040

Or E-mail To:

shefoundationinc@gmail.com

or aquadella@hotmail.com

Criteria for SHE Foundation, Inc. Scholarships

- Applicant must be a female graduating high school senior (with the exception of The YES Program) or must be currently enrolled in a US accredited institution (i.e. college, university, or technical institute) of higher institution.
- Applicant must complete and submit an application.
- Applicant must have a grade point average of 2.7 or better on a 4.0 scale and must submit proof of last completed semester.
- Applicant must submit the following 1 page essays (single spaced at least three paragraphs describing why you feel worthy of this scholarship.
- Provide the most recent copy of your official transcript or report card
- The Foundation requests A headshot photo with your application
- Deadline for all documentation is June 15th.