***John K. Morgan Scholarship Fund***

***Rockdale Coalition for Children and Families***

***Conyers, Georgia***

***Mission***

The John K. Morgan Scholarship is established to recognize outstanding community service in Rockdale County. The scholarship will be awarded to an individual who has demonstrated this outstanding community service in Rockdale County and plans to continue that level of commitment while pursuing post-secondary education. The scholarship will be awarded to assist with college related expenses only.

***Eligibility Requirements***

* Must be a Rockdale County resident.
* Demonstrated outstanding community service in Rockdale County as a volunteer
* Anticipating completion of a high school diploma or GED at the time of application;
* Plans to pursue post-secondary education
* Must be eligible for post-secondary enrollment in degree or certificate program at an accredited institution.
* If selected for the scholarship, will commit to:
	+ Providing a quarterly report of community service hours that describes the service.
	+ Serving a minimum of five hours a month to maintain scholarship and be eligible for renewal of the scholarship. The scholarship may be renewed for up to three years.
	+ Being at a minimum a part-time student in good standing at the post-secondary institution.

***To apply, you must follow these steps****:*

* Applicants can apply between October 2022 and January 31, 2023. Final applications must be postmarked no later than **January 31, 2023.**
* Include in the application a narrative describing your community service in Rockdale County including the name of the organization and type of service. (Maximum of 1000 words.)
* Include a copy of current official high school transcript or official record of progress toward GED (If selected, applicant must provide a copy of final transcripts or official GED certificate to demonstrate eligibility for post-secondary enrollment.)
* Provide two letters of recommendation – one must be from a recipient of your community service.
* Application process:
	+ **Type** the required information in the boxes below.
	+ **Print out** the completed application form.
	+ **Mail** this completed application form (signed by applicant, parent/guardian if applicable) with the necessary documents and materials including the narrative, two sealed letters of recommendations, current official high school or official record of progress toward GED. **The postmark must be no later than January 31, 2023.**

The John K. Morgan Scholarship Committee will select finalists to be interviewed prior to making a selection. Interviews will be conducted during the month of February 2023. The recipient(s) will be recognized and honored at an event on March 30, 2023, at 6:00 p.m. at Piedmont Rockdale Hospital.

**Application**

**John K. Morgan Scholarship Fund**

**Rockdale Coalition for Children and Families**

**Conyers, Georgia**

**Personal Information:**

Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Name: Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle Initial: \_\_\_\_\_\_\_\_

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birth Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Gender: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Educational Information:**

High School/GED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Year Graduated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GPA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College or Technical School to Attend: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Major:/Intended Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Full-Time** or **Part-Time** (Circle one)

**Applicant Status (Please check one):**

\_\_\_\_First Year student

\_\_\_\_Transfer student from another college/university/technical school

**If transferring from another college or university, indicate the level you expect to enter school:**

\_\_\_\_\_First-year student

\_\_\_\_\_Second year student, # hours/units completed

\_\_\_\_\_Third year student, # hours/units completed

\_\_\_\_\_Fourth year student, # hours/units completed

**Special Achievements/Honors and Recognition:**

**Community Service Involvement (must be typed, double-spaced with a maximum of 1,000 words):**

***Attach Community Service Involvement narrative to application.***

**Share with us the community services in which you have participated with organizations within your school. For each organization, when (dates) did you perform the service, for what length of time and what did you do?**

**Organization/Service performed: Dates/Length of time/How often:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Share with us the community services in which you have participated with organizations outside of your school. For each organization, when (dates) did you perform the service, for what length of time and what did you do?**

**Organization/Service performed: Dates/Length of time/How often:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Of the organizations you’ve been involved with, which means the most to you and why?**

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**Checklist for scholarship:**

1. \_\_\_\_\_\_\_\_\_\_\_\_\_ Completed application form
2. \_\_\_\_\_\_\_\_\_\_\_\_\_ Community service involvement narrative (maximum 1000 words).
3. \_\_\_\_\_\_\_\_\_\_\_\_\_ Transcript(s) or GED
4. \_\_\_\_\_\_\_\_\_\_\_\_\_ Reference letters (two)

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

Signature of parent/guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (If under age 18)

Please mail completed application and materials in one 9x12 envelope to:

**Rockdale Coalition for Children and Families**

**John K. Morgan Scholarship Committee**

**PO Box 658**

**Conyers, Georgia 30012**

**www.rockdalecoalition.org**

Incomplete applications will not be accepted.

Deadline: Postmarked no later than **January 31, 2023.**

If you have any questions, please contact Michael Hutcheson:

director@rockdalecoalition.org

(770) 761-9244