

APPLICANT:

REGION VI HEAD
START
ASSOCIATION

GOODIE
WICKLAND
PARENT
SCHOLARSHIP

REGION VI HEAD START ASSOCIATION GOODIE WICKLAND PARENT
SCHOLARSHIP

ELIGIBLE

A parent who currently has a child enrolled or a parent who has had a child previously enrolled (within last two years) in a Head Start Program. (Parents employed in a Head Start Program are ineligible).

SCHOLARSHIP TO BE AWARDED

\$500.00 for each State's Nominee to be paid to the institution where student is enrolled.

QUALIFICATIONS - INFORMATION NEEDED TO APPLY

A Head Start parent as defined above who is currently enrolled in a four year college, a junior college, a technical or vocational school, beauty school, business college, truck driving school, trade school, etc.

Each state may submit only one application. This applicant is to be chosen by State Association from applications received from eligible applicants via way of local Head Start grantees. Application must have the following attached:

1. A letter or statement from institution verifying that applicant is enrolled and is in good academic standings.
2. A copy of transcript from college attached to application
3. Composition of three hundred words or less must be attached defining or discussing each of the areas listed:
 - Personal goals
 - Financial Needs of applicant
 - Plan for completing curent college degree education
4. Three letters of recommendations from the following:
 - Director of local Head Start Program (This means the Director at the central office of the grantee and not the Center Director.)
 - A friend or personal acquaintance
 - A business acquaintance

All information must be typed. Please include Region VI Head Start Association Certification Form(Page 23)

APPLICANT:

REGION VI HEAD START ASSOCIATION
GOODIE WICKLAND PARENT SCHOLARSHIP
CHECK LIST

1. Completed application form _____
 - A copy of transcript
 - A letter or statement from institution verifying that applicant is enrolled and in good standing with institution
 - Region VI Head Start Association Certification Form
2. Three (3) letters of recommendation _____
 - Director of local Head Start Program • Friend or personal acquaintance • Business acquaintance
3. Paragraph of financial assistance needs _____
4. Personal goal statement _____
5. Composition of applicants plans for furthering his/her education _____

NOTE: The letter from the Head Start Director refers to the Head Start Director at the grantee central office and not the center director. Remember all compositions, letters of reference and applications must be typed. Also any additional information which the applicant feels could help in this competition can be submitted, such as copies of awards, recognition, pictures, etc. Be creative! !! The Committee is interested in seeing what accomplishments the Head Start applicant has made in his/her life. Materials submitted will not be returned. Please keep this in mind.

JUDGING POINT SYSTEM

Each applicant will be judged in the areas as stated below: MAX. POINTS		TOTAL
• Completeness of application	10 _____	
• Three letters of reference	10 _____	
• Paragraph of financial assistance needs	30 _____	
• Personal goal statement	25 _____	
• Composition of plans for furthering his/her education	25 _____	

• Total Points 100 _____

GOODIE WICKLAND
SCHOLARSHIP APPLICATION (PLEASE TYPE)

NAME OF

DATE OF BIRTH:

STUDENT ID/COLLEGE

MAILING ADDRESS:

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE:

EMAIL:

CURRENT OCCUPATION:

HIGH SCHOOL ATTENDED:

DATE GRADUATED:

EXTRACURRICULAR ACTIVITIES DURING HIGH SCHOOL YEARS:

HEAD START PROGRAM ASSOCIATED WITH:

SCHOOL CURRENTLY ATTENDING:

APPLICANT:

FIELD OF STUDY:

HOURS OR SEMESTERS ACQUIRED TO DATE:

CURRENT SOURCE OF FINANCIAL ASSISTANCE TO ATTEND SCHOOL:

FUTURE DESIRES/ASPIRATIONS:

SIGNATURE: _____ DATE:
