**2023-2024 Scholarship**

The Grace Lanes’ Scholarship Committee announces the ‘23-’24 **Grace Lanes’ Spirit of Community Scholarship Awards*.*** Under the program, TWO (or more) $500 scholarships will be awarded to graduating seniors attending a Southwest Missouri high school or homeschool program.

Program Guidelines & Priorities:

\*Seeking graduating seniors with a record of good citizenship in the community in non-school sponsored activities and participation in extracurricular school activities.

\*Applicants must plan to attend a technical school, two (2)-year community college, or four (4)-year college or university.

\*Applicants must have a Cumulative GPA of 2.5 or higher.

\*Scholarship funds will be paid on or before **September 1, 2024**. The scholarship funds will be issued to the student for college expenses (tuition, books, supplies).

\*Applicants must have the endorsement of their Guidance Counselor on their application attesting they are qualified for this scholarship program.

\*Applications must be received by the Grace Lanes’ Scholarship Committee no later than

**May 1, 2024**. Late applications will not be accepted.

\* Mail or deliver one copy of a completed and typed application package to:

| *(This includes application with sign-off by Guidance Counselor, essay, and letter of recommendation; Incomplete applications will not be considered)*  | Grace Lanes’ Scholarship Committeec/ o Grace Lanes219 E. 3rd Street Carthage, MO 64836 |
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 More applications are available online at https://www.gracelanes.com/scholarship-ad-and-application

All applications will be reviewed and recipients selected by the Grace Lanes’ Spirit of Community Scholarship Committee. Incomplete applications will not be considered.

Please submit any questions to: r.botts@gracelanes.com or Samantha@sattcorp.net

**Grace Lanes Spirit of Community**

**SCHOLARSHIP APPLICATION 2023-2024**

|  Please **type** your answers. *Use an additional piece of paper if necessary* |
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| 1. | Last Name: | First Name, Middle Initial: |
| 2. | Mailing AddressStreet: City: Carthage State: MO Zip: 64836 |
| 3. | Daytime telephone number: Email address:  |
| 4. | Date of birth: Month Day Year  |
| 5. | Cumulative Grade Point Average (GPA): \_\_\_\_\_\_\_\_\_\_ (On a 4.0 scale)  |
| 6. | A. List any academic honors, awards and membership activities while in high school: B. List your hobbies, outside interests, extracurricular activities and school related volunteer activities: C. List your non-school sponsored volunteer activities in the community: (or attach resume) |
|   | A. If you have decided on the college you will attend, please list the school name:  B. If not, list your top three (3) college choices:  |
| 8.  | Anticipated field of study:  |
|  9. | Number of years of residency in Southwest Missouri:  |
| 10. | Name & address of parent(s) or legal guardian(s): *(Include address if different than your own listed in Question 2.)* Name(s): Street: City: Carthage State: MO Zip:64836Home phone of parents or legal guardians: Work phone: |
| 11. | On a separate document, please write an essay (250 - 500 words) addressing the following:*Describe how you will use your education, talents, and career in service to your future local and global communities.*  |
| 12. | One (1) letter of recommendation from a leader within the volunteer organization you serve or have served |

### STATEMENT OF ACCURACY FOR STUDENTS

* I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship winner, my picture may be taken and used to promote the Grace Lanes’ Spirit of Community’s Scholarship Program. (Winner may waive the photo due to unusual or compelling circumstances.)
* I hereby understand that if chosen as a scholarship winner, according to the Grace Lanes’ Spirit of Community Scholarship policy, I will try to be present at any 2023 awards ceremony and/or reception to receive my scholarship award.
* I hereby understand that if chosen as a scholarship winner, according to Grace Lanes’ Spirit of Community Scholarship policy, it is my responsibility to submit to the Grace Lanes’ Scholarship Committee, no later than September 1, 2023, a certificate of enrollment for the fall semester, which includes the Student ID number and Financial Aid Office address.
* I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

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

**STATEMENT OF SUPPORT BY GUIDANCE COUNSELOR**

I hereby affirm that this application meets the criteria set forth by this scholarship program and support submission of this application to Grace Lanes’ Spirit of Community Scholarship Program.

Guidance Counselor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Guidance Counselor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_**

Checklist:

\_\_\_ Application (typed and printed for submission)

\_\_\_ Essay on separate sheet of paper

\_\_\_ Guidance Counselor signature

\_\_\_ One letter of recommendation

**MAIL OR DELIVER COMPLETED APPLICATION PACKAGE TO GRACE LANES AT:**

**Grace Lanes Scholarship Committee**

**c/o Grace Lanes**

**219 E. 3rd Street**

**Carthage, MO 64836**