

Morton and Beatrice Harrison Scholarship Fund Application Guidelines

Purpose: To provide scholarships to:

- Young adults who, as a result of legal offenses as juveniles or young adults, have come to the attention of the Lycoming County's Probation Department;
- Young adults as identified by the Lycoming County Reentry Service Center;
- Young adults as identified by the Lycoming County Children & Youth Services Agency;
- Clients of the Nurse Family Partnership;
- Young adults graduating from a public Lycoming County High School who have been identified with at-risk behavior in their school district throughout their secondary education (grades 6 through 12) may also be considered

Additional Criteria:

- Plan to attend an accredited two- or four-year college/university, technical or trade school, or other approved education or training program;
- Demonstrates a strong willingness to make positive changes in their lives and pursue educational and/or job training goals that will enable them to fulfill their human potential;
- Demonstrates a strong likelihood of success in meeting their education and training goals;
- Will have unmet financial need

Required Attachments:

- Completed application;
- Proof of acceptance to a qualified institution of higher education;
- Resume including job experience, volunteer experience, and community or school involvement;
- At least one letter of reference;
- Essay outlining w how you overcame adversity in your life and your ultimate career goals

Submission:

- Mail application and all required documents to:
FCFP Philanthropy Center
Attn: Program Office
201 West Fourth Street
Williamsport, PA 17701
- Or drop off at the office between 8:30am – 5:00pm

Deadline:

- April 15

Scholarship Selection Process:

- The First Community Foundation Partnership of PA Selection Committee will select recipient(s).

Scholarship Awards Disbursement:

- Scholarship(s) will be awarded annually. Scholarship awards are paid directly to the institution of higher education. Scholarship availability and award amount is subject to change yearly.

Questions please contact:

- Betty Gilmour, Director of Grantmaking, First Community Foundation Partnership
Phone: 570.321.1500
Email: BettyG@fcfpartnership.org



Scholarship Application

For High School scholarships, contact the Guidance Office for application submission deadline date

Applicant information.

MISS __ MR. __ NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ COUNTY _____

CONTACT PHONE _____ H __ C __ EMAIL _____

HIGH SCHOOL (IF APPLICABLE) _____

COUNSELOR _____ PHONE NUMBER _____

AREA OF STUDY: MAJOR _____ MINOR _____

List parents' or guardians' information.

MS. __ MRS. __ MR. __ NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ COUNTY _____

CONTACT PHONE _____ H __ C __ EMAIL _____

MS. __ MRS. __ MR. __ NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ COUNTY _____

CONTACT PHONE _____ H __ C __ EMAIL _____

List other household dependents. Give age, college, or occupation.

_____	_____
_____	_____
_____	_____

List name of institutions to which you have applied.

_____	Pending __ Accepted __ Enrolled __
_____	Pending __ Accepted __ Enrolled __
_____	Pending __ Accepted __ Enrolled __

College Costs / Financial Aid Information

Estimated Family Contribution (from FAFSA form) _____
Estimated Cost of Tuition _____
Estimated Cost of Room and Board _____
Estimated Total of Financial Aid _____
Total of other Scholarships/Awards received _____

Required Attachments:

- Essay
 - Refer to scholarship criteria for specific question
- Resume/Activities
- Letter(s) of recommendation
 - Refer to scholarship criteria for letter requirements
- Must current school transcripts
 - Transcripts may not be required for all scholarships. Review to scholarship criteria for requirements

TIPS on Essay, Resume and Recommendation Letters

Essay

Keep in mind that this is the only component of the application that allows you to tell the selection committee something about yourself. Demonstrate that you are goal-directed, motivated, and that you have a clearly-defined set of goals. Applications may be reviewed by different committees and their determination of the recipient may be based on the essay.

Resume

List the following information with year and approximate number of hours per week or month spent participating in each:

- Varsity, junior varsity, and/or community teams
- Memberships and participation in school organizations and activities, community organizations
- Leadership roles/elected offices
- Awards received
- Volunteer experience
- Employment experience

Letter of Recommendation

Provide reference letters from someone familiar with your goals and attributes. Consider a current or former teacher, coach, employer, clergy member, volunteer supervisor, neighbor or family friend. References from guidance counselors are not encouraged unless you have a unique relationship.

Signatures are required

I hereby affirm that the information submitted is true and complete to the best of my knowledge. I authorize First Community Foundation Partnership of Pennsylvania (FCFP) to share this information with members of the selection committees.

I understand that all information is confidential and shared only with FCFP and members the selection committees.

I understand that late and/or incomplete applications will be disqualified.

APPLICANT'S SIGNATURE

PARENT OR GUARDIAN'S SIGNATURE

DATE

DATE