

UP RISING STARS INC



NON PROFIT ORGANIZATION SCHOLARSHIP APPLICATION 2019

Cover letter

APPLICATION REQUIREMENTS:

Please complete the attached application form in its entirety to apply for the Phillip Dorsey Scholarship and submit it by April 1, 2019. Late and incomplete applications will not be accepted.

- **Must be a resident of the New Jersey or New York Metropolitan Area**
- **Must be a High School Senior**
- **Must already have applied to a 4-year undergraduate program or be enrolling for the upcoming Fall**
- **Must have a minimum 2.7 GPA to apply**
- **Must demonstrate leadership potential through community service and civic engagement**
- **Must submit all 4 years of High School transcripts from all High Schools that you have attended. Transcripts must be official school documents**
- **Must submit official College Board SAT Scores or ACT Test Scores**
- **Must follow Up Rising Stars Inc. on Facebook, Instagram and Twitter**
- **Application must be neatly printed or typed and filled out completely or the application will not be accepted**
- **Final candidates must be available for a phone interview**
- **Only selected applicants will be notified**
- **Awarded amount 750.00 or higher which MUST be used for the Fall 2019 or will be forfeited**
- **Recipient must attend Awards Gala to receive award**

Thank you and we look forward to receiving your application.

**Sincerely
Up Rising Stars Inc.
Board of Directors**

UP RISING STARS INC



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QUALIFICATIONS: To be eligible for the Phillip Dorsey Scholarship you must be a High School Senior with an overall grade point average of 2.7 or higher and be applying to a four year college.

APPLICATION INSTRUCTIONS:

Complete and return the first four parts of the Scholarship Application. Incomplete applications will not be accepted and disqualified.

ESSAY: Write an essay about why you deserve to receive the Phillip Dorsey Scholarship and what factors have influenced you to pursue a college degree. Demonstrate your talents by writing about any special interest or special circumstances that you would like the selection committee to consider. Essay **MUST** include your **FINANCIAL NEED**. Please include any other attributes which you feel is pertinent to the committee, such as evidence of leadership, and/or community service and your **FINANCIAL NEED**. Only one (1) essay is needed. Use 8 ½ “x 11”, double- spaced with 1” margins. The essay should be 500-750 words. Use your name, date, and school name as the essay Title.

REFERENCES: Be sure to include two letters of recommendation: one must be personal and one professional. Please ensure that only 2 letters of recommendation are sent on your behalf. Additional letters of recommendation will not be considered. All letters must be received by the deadline date. Late supporting materials will not be accepted. Make sure each reference includes your full name.

UP RISING STARS INC
P.O. BOX 2403
ELIZABETH, NJ 07207

Please return the following 4 pages completed along with your essay and your references. Mail your application and essay to the above address, no later than Monday, April 1st, 2019. Applicants with postmarks after April 1st, 2019 will not be accepted.

Application Deadline
Monday, April 1st, 2019
For more information contact www.uprisingstarsinc.org

UP RISING STARS INC
NON PROFIT ORGANIZATION



SCHOLARSHIP APPLICATION 2019

Please Print or Type

Name _____
First Middle Last

Student Identification No/SSN. _____ - _____ - _____

Address _____
Street

City State Zip Code

Phone (Day) _____ (Eve) _____

After following our pages, please provide your social media account names below:

Facebook: _____ Instagram: _____ Twitter: _____

Major/ Division of (Check One):

- Allied Health Arts/Science Behav/Social Science Business
 Cinema & ENT. Media/Arts Communications Computer Information Systems
 Education Poli Sci/Pre-Law Poli Sci/Pre-Law Pre-Med _____ Other

Please Specify

SAT Scores Math _____ and Verbal _____

List by (number only) the Awards and Scholarships for which you are applying:

List any other High Schools attended, and final GPA: (Transcripts from any school listed must be included in your application) _____

What college(s) do you plan to attend next year? _____

EMPLOYMENT

Name of Employer: _____ Phone # _____ Start date _____
End Date _____ Direct Supervisor _____ Phone # _____

Name of Employer: _____ Phone # _____ Start Date _____
End Date _____ Direct Supervisor _____ Phone # _____

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Scholarship Application 2019



Print First and Last Name

Please Print:

In 3 sentences or less please answer the questions below; you may use a separate sheet of paper if necessary. (Please print clearly if this section is not typed)

Educational Goals:

Personal Goals:

Special Interest:

Financial Need:

Leadership Experience:

School Involvement / or Activities:

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NON PROFIT ORIGANIZATION
SCHOLARSHIP APPLICATION 2019



Name two people who will be writing letters of reference on your behalf. (*Two names must be listed*)

1. _____ 2. _____
Personal Ref: _____ **Professional Ref:** _____

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IMPORTANT INFORMATION

Selected applicants will be notified by letter of their eligibility and the results of their applications prior to the Scholarship Awards Gala. Application must be filled out completely

I UNDERSTAND THAT SUBMISSION OF THIS APPLICATION AUTHORIZES THE UP RISING STARS INC SCHOLARSHIP COMMITTEE TO OBTAIN AN OFFICIAL COPY OF MY TRANSCRIPT. I HEREBY AUTHORIZE RELEASE OF ALL THE FOREGOING SCHOLARSHIP INFORMATION AND/ OR MATERIALS. I ALSO GIVE PERMISSION TO RELEASE MY NAME TO THE SPONSORS, NEWSPAPERS AND UP RISING STARS INC WEBSITE FOR PUBLICITY

Signature

Date:

PRINT NAME CLEARLY

Disclaimer: Financial Aid Recipients Please Note: Awards and scholarships are considered a “resource” and must be included in a student’s financial aid budget. If you are awarded a scholarship that exceeds your unmet needs, a reduction or payment of financial aid may occur.

All applications must be signed. Incomplete applications will not be accepted.

For Office Use

Received by _____ Date _____ Transcripts _____

Application _____ Essay _____ Reference #1 _____ Reference #2 _____

Meets Criteria? _____ If no, explain _____

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Scholarship Recommendation 2019



Print Applicant Name

Thank you for agreeing to write a letter of recommendation for the student identified on this request form. Your assessment of the applicant's achievements, reliability, and promise in the area of study for which they have applied will assist the selection committee. Please include, the following information, if applicable. You may photo copy this page.

- **How long have you known the student?**
- **If you have instructed the student, in what course(s)?**
- **Please give specific examples as to why you feel the applicant deserves this scholarship.**
- **Does the student have potential for success and achievements in the future?**
- **Include any other comments(s) that will help the committee with the selection process.**

Please complete and return to the applicant: All materials must be submitted all together.

Mail to:

**UP RISING STARS INC
ATTN: Scholarship Committee
P.O. Box 2403
Elizabeth, NJ 07207**

Deadline to submit application with recommendations letters is Monday, April 1st, 2019.