



**SCHOOL YEAR 2024-2025**

# Westgate Neighborhood Scholarship APPLICATION

## GENERAL INFORMATION

Student's Name:

Street Address:

City:  State:  Zip:

Email:

Cell Phone:  Home Phone:

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Parent/Guardian Name:

Email:  Phone:

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Name of school (currently enrolled, full time):

Anticipated Date of Graduation:  GPA:

Attach a current dated transcript signed by a school administrator or counselor.

## COLLEGE OR VOCATIONAL SCHOOL INFORMATION

College or  Vocational School you plan to attend:

City:  State:  Zip:

Address of The Office of Financial Aid:

Street Address:

City:  State:  Zip:

Entrance Date:

Intended Degree/Major/Area of Study:

College or  Vocational School you plan to attend:

City:  State:  Zip:

Address of The Office of Financial Aid:

Street Address:

City:  State:  Zip:

Entrance Date:

Intended Degree/Major/Area of Study:

### **RESIDENCY VERIFICATION**

Please indicate in the boxes below the two bills you are submitting as verification of your current address. A parent or guardian must be a current resident of Westgate.

Electric  Gas  Water  Cable  Insurance

If, as a renter, you do not pay utilities, please submit a letter from the lessor and/or a copy of the rental agreement stating that utilities are included.

### **LIST Honors/Achievements/Activities/Community Service/Leadership**

*Include years of participation, name of organization/activity, your responsibilities/contributions.*

## REFERENCES / RECOMMENDATIONS

List three references we may contact, at least one of whom provides a Letter of Recommendation.

Name:  Nature of Relationship:

Email:  Phone:

Name:  Nature of Relationship:

Email:  Phone:

Name:  Nature of Relationship:

Email:  Phone:

## APPLICATION ESSAYS

Attach responses to two of the following topics. Include the selected discussion prompt in the header of each.

### TOPICS (select two)

- Discuss how you have been directly affected by someone's demonstration of leadership or community service. What did you learn and how might you pay it forward?
- Discuss an experience you have witnessed that broadened your understanding of leadership and community service. How might you use this awareness to impact quality of life issues within communities?
- Discuss an idea you have for a community service project that could have a positive effect on the quality of life for residents in and around Westgate.
- Discuss ways in which you have been a positive force for change, or improvement in your community.

## SIGNATURE OF CERTIFICATION

- By (checking this box), and typing my name below I certify that the information submitted in this application is true and correct to the best of my knowledge and belief. I understand that any misrepresentation, falsification, or omission of any facts called for in the application may render this application disqualified.

Name:  Date:

**When complete, save a copy of this PDF and rename it to *include your name in the title.***  
**Return it, along with the other requested attachments, by the deadline.**  
**[HGT@WestgateNeighbors.org](mailto:HGT@WestgateNeighbors.org)**