



## NEW Scholars Application 2018-2019

**NEW Scholars, a program of Scholarships, Inc. supports area students on their path to college**

Since 1962, Scholarships, Inc. has worked with students, parents and schools to award college scholarships. NEW Scholars is a program created to inspire growth and encourage middle school students to become college success and scholarship ready.

### Eligibility Requirements

- Student who will attend Edison/Washington Middle School, or current Edison/Washington Student
- Family must qualify for free or reduced lunch program
- Neither parent has completed an associate/bachelor's degree

### Selection Requirements

- Selected students will be motivated to learn and succeed (current report card required)
- Selected students will have consistent school attendance and no major disciplinary infractions
- Selected students must be willing to prepare for college by learning college prep skills

### Student/Family Participation Expectations

- Week-long Summer Academy (for soon-to-be sixth graders only) held in August (9 AM – 3 PM)
- Regular attendance at afterschool program (3 PM – 6 PM) One day per week during school year
- Regular attendance at monthly Saturday meeting for parents/guardians

### Program Benefits

- Selected students will learn how to succeed in school, go on to college, and the resources to help cover the cost of college.
- Selected students will have opportunities to attend fun workshops, volunteer in the community, and visit Wisconsin universities.
- Students will receive an incentive-based scholarship up to \$5,000 dollars based on participation and engagement.

**Non-Discrimination Policy** Scholarships, Inc. does not and shall not discriminate on the basis of any applicable protected classification including, but not limited to, race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities or operations. These activities and operations include, but are not limited to, hiring and firing of staff, selection of volunteers and vendors, advertising for available scholarships, selection of scholarship recipients, and the provision of related services. Scholarships, Inc. is committed to providing an inclusive and welcoming environment for all members of its staff, volunteers, vendors, applicants, and scholarship recipients.

**Completed applications must include a copy of the student's report card.**

**Return your application to the Scholarships, Inc. office at  
2301 Riverside Drive, Green Bay, WI 54301**



**NEW Scholars Application**  
Please print clearly

**Student's Full Name** \_\_\_\_\_  
Last First Middle

**Date of Birth** \_\_\_\_ / \_\_\_\_ / \_\_\_\_  Male  Female **Student's Phone** \_\_\_\_\_

**Student's Address** \_\_\_\_\_  
Street City State Zip

**School Information**

If you are filling out this application during the summer, provide information relating to the coming school year

**Student's School Email** \_\_\_\_\_ **Current Grade** \_\_\_\_\_

**Current School** \_\_\_\_\_ **Elementary School** \_\_\_\_\_

**Student will attend**  Edison/Preble  Washington/East

**Parent/Guardian Information**

**Mother's Name:** \_\_\_\_\_

**Mother's Highest Level of Education:**  Middle school  High school  Some college

**Father's Name:** \_\_\_\_\_

**Father's Highest Level of Education:**  Middle school  High school  Some college

**Primary Phone:** \_\_\_\_\_ **Primary E-mail** \_\_\_\_\_

**Secondary Phone:** \_\_\_\_\_ **Secondary E-mail** \_\_\_\_\_

**At least one parent/guardian or other adult from your family will be available to attend Saturday morning workshops once per month.**  Yes  No

**Does the student receive or qualify for free/reduced lunch?**  Yes  No

**Is English the student's second language?**  Yes  No **Primary language, if not English** \_\_\_\_\_

**Parent Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Student Writing Sample**

The answer to this question is your first writing sample for NEW Scholars. Please plan your answer and read it over to make sure it is your best work. *Please complete all student questions in English.*

What do you want to be when you grow up and why? How will NEW Scholars help you to achieve this goal?

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Why do you want to go to college? Why do you think college would be a good fit for you in the future?

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**Parent/Guardian Short-Answer Questions**

*These questions should be completed by a parent or guardian in English or in the parents first language (Spanish, Hmong, Somali, etc.) if preferred.*

Why do you want your child to participate in NEW Scholars? In addition to making sure your child attends weekly meetings, please share an example of how you will support him/her throughout the program.

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I understand that, if my child is selected to participate in the NEW Scholars program, he/she is required to attend weekly sessions with the NEW Scholars group and I, the parent, am required to attend monthly parent meetings with other NEW Scholars parents.

**Parent Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

## NEW SCHOLARS PROGRAM PERMISSION, CERTIFICATION AND RELEASE

**INSTRUCTIONS:** Complete each section below and return this form to the NEW Scholars, 2301 Riverside Drive, Green Bay, WI 54301. A copy of this form must be on file with the NEW Scholars Program prior to enrollment in the Program.

Student Name:	D.O.B.:
Current School of Attendance:	

### Permission to Photograph

I understand that NEW Scholars may take photographs of NEW Scholars participants and activities. I agree NEW Scholars shall be the owner of and may use such photographs relating to the promotion of future activities. I relinquish all rights that I may claim in relation to the use of said photographs.

Parent/Guardian Signature:

Date:

### Certification to Hold Harmless

By signing below, I agree to hold harmless and indemnify NEW Scholars, their officers, employees and agents, and NEW Scholars from any and all liability, loss, damages or expenses which are sustained or required during the course of these events.

Parent/Guardian Signature:

Date:

### Authorization to Obtain and Disclose Information

I, the undersigned, hereby authorize the Green Bay Area Public School District to disclose to NEW Scholars Program, a program of Scholarships, Inc., by any means (e.g., verbal, written or electronic) the following records regarding the above-named student: student address, parent email address, attendance, grades, assignments, schedules, state assessment, student standardized achievement data, student behavior referral data, ACT scores, and/or ACT Aspire scores only. I authorize NEW Scholars Program to disclose by any means (e.g., verbal, written or electronic) information regarding the above-named student to the Green Bay Area Public School District. I understand that the information is requested for the purpose of administering the NEW Scholars Program. I understand that I have a right to a copy of the records that are disclosed and a right to a copy of this authorization (a fee for education record copies may be imposed.)

**Withdrawal of Authorization** – I understand that I have a right to revoke this authorization, except to the extent that disclosure has already been made in reliance on this authorization. I understand that my revocation is effective only if it is in writing and it is submitted to the individual/agency that is releasing information.

***This permission is valid until revoked or for the duration of the student's enrollment in the NEW Scholars program.***  
A copy of this form is as effective as the original. I certify that I am the parent or legal guardian, of the above-named student, or that I am the student and of majority age, and have authority to sign this authorization.

Signature (Parent/Guardian)

Date

Signature (Student – if applicable)

Date

Print Name (Parent/Guardian)

Relationship to Student (parent, guardian, personal representative or adult student)