



October 1, 2018

Dear Parents and Students,

The Education Foundation of Sarasota County is looking for high school juniors (Class of 2020) who are currently attending North Port High School or Riverview High School in Sarasota County, Florida and are participating in Career Technical Education (CTE) courses that include **early childhood education, nursing, engineering or business-related tracks.**

As participants in the **In-Demand Careers Scholars** program, students will have the opportunity to work with a supportive advocate, receive weekly college and career preparation programming through our Student Success Centers, and earn a Florida Prepaid 2-year state college scholarship. This scholarship covers tuition for two years at a Florida state public college.

This program is made possible with matching funds provided by Florida Prepaid College Foundation. Students with good grades, attendance and behavior who also **aspire to obtain a college degree or certificate in Florida with the above-mentioned focus areas** are encouraged to apply.

Students brought into the In-Demand Careers Scholars program commit to:

- Stay drug and crime-free
- Maintain at least a 3.0 GPA and a “C” or above in all courses
- Attend school regularly
- Exhibit good behavior in and out of school
- Volunteer and become involved in the community
- Participate weekly in the Student Success Center College, Career & Life Readiness program during 11<sup>th</sup> & 12<sup>th</sup> grade (including summer and winter break)
- Pursue a college degree that includes a technical certificate, A.S degree, or college minor in early childhood education, nursing, business/IT or engineering/industrial technologies at a technical college, state college or university in Florida
- Maintain frequent communication with the Education Foundation of Sarasota County Scholarship Manager through college graduation, which includes sending transcripts every semester and completing the FAFSA annually.

The eligibility criteria for the program are enclosed, along with the application. Please pay special attention to the supporting documents that are required with the application.

**Application Deadline: November 2, 2018**

Sincerely,

A handwritten signature in black ink, appearing to read 'Jennifer Vigne'.

Jennifer Vigne, President  
Education Foundation of Sarasota County

## 2018-2019 STUDENT APPLICATION

**Application deadline is November 2, 2018**

### In- Demand Careers Scholar recipients receive:

- A Scholarship – When the student has successfully completed the program requirements and graduates high school he/she will earn a Florida Prepaid 2-year state college scholarship. At minimum, this Florida College Prepaid Scholarship provides tuition at the Florida state public college rate for two years. This scholarship may be applied toward the total expense of a variety of post-secondary education options, ranging from state colleges, state universities, and eligible training programs. Depending on the choices your student makes, there will likely be additional tuition/fee expenses. This scholarship does **not** include room, board, books, travel or other incidental costs and expenses—these are the responsibility of the student/parent.
- An Advocate - There is an Education Foundation of Sarasota County staff member who will meet with the student regularly to assist and encourage the student to achieve the student's full potential.
- College, Career & Life Readiness Programming – Weekly College, Career & Life Readiness programming at the Student Success Center (11<sup>th</sup> & 12<sup>th</sup> grade) which supports students through ACT/SAT test prep, College and Scholarship application processes, financial aid applications, developing life and employability skills (interpersonal skills, financial literacy, communication skills, critical thinking skills), and much more through a variety of workshops and weekly labs.
- Ongoing support through college graduation – Continued support from staff & Education Foundation of Sarasota County volunteers to ensure students are making adequate process towards a degree, completing financial aid and scholarship applications, and connecting students with career coaches.

### Are you eligible?

- Be a junior (class of 2020) attending North Port High School or Riverview High School and participate in Career Technical Education (CTE) courses that include early childhood education, nursing, engineering or business-related tracks
- 3.0 unweighted GPA calculated through sophomore year
- Have good attendance and behavior
- U.S. Citizen or Permanent Resident Alien
- Social Security number
- Have a desire to pursue a college degree that includes a technical certificate, AS, or college minor in early childhood education, nursing, business/IT or engineering/industrial technologies at a State College or University in Florida
- Be a first-generation college student or have two or more of the following factors: **(please mark below any that apply)**

(eligibility continued on next page)

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Single parent</li> <li><input type="checkbox"/> Deceased parent</li> <li><input type="checkbox"/> Incarcerated parent</li> <li><input type="checkbox"/> Absent parent</li> <li><input type="checkbox"/> Poor relations between biological parents</li> <li><input type="checkbox"/> Department of Children &amp; Families (DCF) involvement</li> <li><input type="checkbox"/> Parents did not graduate from college</li> <li><input type="checkbox"/> Extended family in home</li> <li><input type="checkbox"/> Parents did not graduate from high school</li> <li><input type="checkbox"/> More than two siblings</li> <li><input type="checkbox"/> Parent/guardian was a teen parent</li> <li><input type="checkbox"/> Student is a teen parent</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Received Temporary Assistance for Needy Families (TANF) benefits in the last year</li> <li><input type="checkbox"/> Student will be first in family to attend college</li> <li><input type="checkbox"/> English not primary language spoken in student's home</li> <li><input type="checkbox"/> Parent/guardian is a migrant worker</li> <li><input type="checkbox"/> Parent/guardian loss of employment within last year</li> <li><input type="checkbox"/> Family is homeless or living with extended family/friends</li> <li><input type="checkbox"/> Home is in foreclosure</li> <li><input type="checkbox"/> Serious illness in household</li> <li><input type="checkbox"/> Disabled student or household family member</li> <li><input type="checkbox"/> Student is or has been in foster care</li> </ul> |
|--|--|

### Are you eligible? (continued)

- Meet income eligibility guidelines (outlined below) based on your 2017 taxes.

### INCOME ELIGIBILITY GUIDELINES

Income eligibility is above the USDA guidelines for free & reduced lunch, but within the middle-class income “gap”.

HOUSEHOLD SIZE	ANNUAL INCOME GREATER THAN	ANNUAL INCOME LESS THAN
1	22,460	62,460
2	30,452	70,452
3	38,444	78,443
4	46,436	86,435
5	54,428	94,427
6	62,420	102,419
7	70,412	110,411
8	78,404	118,403

*Total income before taxes, social security, health benefits, union dues, or other deductions must be reported.*

### Application Deadline

Completed applications and all supporting documents are due by **November 2, 2018**. Incomplete applications will not be reviewed. Applications will be reviewed by Education Foundation of Sarasota County staff to confirm eligibility and by a community based selection community. Participants will be notified of the result by the first of January 2019. Selected students would begin participating in programs in January 2019. Applications must be submitted to the Education Foundation of Sarasota County, 1960 Landings Blvd., #120, Sarasota, Florida 34231.

## 2018-19 Scholarship Application Student/Parent Checklist

**Use blue or black ink to complete the application.**

1. \_\_\_\_\_ Completed application including student & parent signatures
2. \_\_\_\_\_ Signed "Information Release" form
3. \_\_\_\_\_ Signed "Commitment of Agreements" form
4. \_\_\_\_\_ Parent & Student Essays (include challenges; honesty will help you)
5. \_\_\_\_\_ Copy of parent's **2017** Tax Return
6. \_\_\_\_\_ The last two month's paystubs or other proof of income
7. \_\_\_\_\_ Copy of student's transcript (Unofficial is acceptable)
8. \_\_\_\_\_ Completed teacher/program advocate certification form
9. \_\_\_\_\_ One letter of recommendation from a current teacher
10. \_\_\_\_\_ A copy of the student's **U.S. birth certificate, certificate of naturalization, US passport, or permanent resident card**
11. \_\_\_\_\_ A copy of the student's **social security card**
12. \_\_\_\_\_ **Return the completed application packet to Education Foundation of Sarasota County by **November 2, 2018****

### SCHOLARSHIP APPLICATION Instructions:

Attached is an application for the In-Demand Careers Scholars program. The information in this application will be used to determine your child's eligibility. It will also help us determine if the program is right for him/her. Therefore, please answer the questions honestly and thoroughly. Your information will remain confidential and will only be seen by the student selection team and program staff.

*Please complete the application using the following guidelines:*

- Please refer to income eligibility guidelines on front page to determine student eligibility into program. If you qualify based on the income guidelines complete the remainder of the application.
- Sections A & E are for the student to complete.
- Sections B, C, D, & F should be filled in by the parent(s)/guardian(s).
- The "Information Release Form" needs to be signed and included with the completed application.

**Once you and your child have completed and signed the application, please attach a copy of your 2017 federal income tax return(s) and the most recent month's paystubs or other proof of income. Also attach proof of child's legal citizenship (U.S. birth certificate, certificate of naturalization, US passport or permanent resident card) and a copy of their social security card.**

**Please contact your respective Student Success Center College Career Advisor (Jenna Thiel, NPHS or Rebecca Lewis, RHS) at the Education Foundation of Sarasota County with any questions regarding the In-Demand Careers Scholars program application. Thank you.**



## AUTHORIZATION FOR INFORMATION RELEASE FORM

I, the undersigned parent or legal guardian of \_\_\_\_\_  
(Student Applicant's Name)

hereby grant, authorize and consent to allow Sarasota County Schools and Education Foundation of Sarasota County or the designees, including without limitation teachers, and donors, to have access to the cumulative folder and discipline record of the minor child named above. This information includes, but is not limited to, the current and past GPA, test scores, attendance and discipline records on the minor.

I hereby release, discharge and agree to hold harmless Education Foundation of Sarasota County and any mentor, representative and employee from any liability by virtue of any use whatsoever of said information contained in the cumulative folder and discipline record. I understand that this release is valid for the application period and if selected, the length of the time that the minor child remains in the In-Demand Careers Scholars program.

Date: \_\_\_\_\_

Name of Student Applicant: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

\_\_\_\_\_  
*Parent/Guardian's Signature*

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Email: \_\_\_\_\_ Cell phone: \_\_\_\_\_



## COMMITMENT OF AGREEMENTS

I understand that funds are contingent on my successful completion of high school and acceptance into a technical college, state college, or state university in Florida. I will maintain the minimum grade point average, remain drug & crime free, and will maintain my eligibility for a certificate, or degree with an entrepreneurship focus. I agree to maintain regular communication with the Education Foundation of Sarasota County and participate in activities as requested.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

I agree to support the requirements of my child and submit the required identification and proof of income verification as outlined in the application.

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



**TEACHER/PROGRAM ADVOCATE CERTIFICATION**  
(To be completed by the teacher or program advocate)

I, the undersigned teacher or program advocate of \_\_\_\_\_ ,  
*(Student Applicant's Name)*

confirm that the above-mentioned student is making satisfactory progress as an active participant in the following CTE program:

(choose one)

\_\_\_\_\_ early childhood education

\_\_\_\_\_ nursing

\_\_\_\_\_ engineering

\_\_\_\_\_ business

Teacher/Program Advocate Signature \_\_\_\_\_

Date \_\_\_\_\_

Teacher/Program Advocate Printed Name \_\_\_\_\_

North Port High School \_\_\_\_\_ or Riverview High School \_\_\_\_\_



IN-DEMAND CAREERS SCHOLARS PROGRAM APPLICATION 2018-19

Application is due by November 2, 2018 to Suzanne Burke at the Education Foundation of Sarasota County at 941-927-0965

SECTION A: Student Identification Information

Student Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Middle School \_\_\_\_\_

Where do you attend high school? \_\_\_\_\_

Student ID # \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Grade \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Street, Apt # \_\_\_\_\_ City, Zip \_\_\_\_\_

Student Phone # \_\_\_\_\_ Student Email \_\_\_\_\_

Parent Cell # \_\_\_\_\_ Parent Email \_\_\_\_\_

Student Race: American Indian/Native American \_\_\_\_\_ Asian \_\_\_\_\_

Black/African-American \_\_\_\_\_ Caucasian \_\_\_\_\_ Pacific Islander/Hawaiian \_\_\_\_\_

Multicultural \_\_\_\_\_ Hispanic \_\_\_\_\_ Other \_\_\_\_\_

Is student a U.S. Citizen? Yes \_\_\_ No \_\_\_

Is student a Permanent Resident Alien? Yes \_\_\_ No \_\_\_

Does student have a Florida Prepaid Plan? Yes \_\_\_ No \_\_\_



**SECTION B: Household Information**

Mother \_\_\_\_\_ Social Security # \_\_\_\_\_  
(Last, First, MI)

Date of Birth \_\_\_\_\_ Last Grade Completed in School \_\_\_\_\_

Father \_\_\_\_\_ Social Security # \_\_\_\_\_  
(Last, First, MI)

Date of Birth \_\_\_\_\_ Last Grade Completed in School \_\_\_\_\_

Applicant lives with: Mother \_\_\_\_\_ Stepmother \_\_\_\_\_ Grandmother \_\_\_\_\_ Guardian \_\_\_\_\_  
Father \_\_\_\_\_ Stepfather \_\_\_\_\_ Grandfather \_\_\_\_\_  
Ward of Court \_\_\_\_\_ Other \_\_\_\_\_

Number of brothers \_\_\_\_\_ Number of Sisters \_\_\_\_\_

Please list all persons living in the home other than student/applicant:

<u>Name</u>	<u>Age</u>	<u>Relationship</u>	<u>Highest Level of Education Completed</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Independent siblings living outside the home:

<u>Grade Name Completed</u>	<u>Age</u>	<u>Brother/Sister</u>	<u>Currently in School (Yes/no)</u>	<u>Last</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

### SECTION C: Employment Information

#### Parent/Guardian's Current Employer

Name of Parent/Guardian \_\_\_\_\_

Employer \_\_\_\_\_

Occupation \_\_\_\_\_

Address of Employer \_\_\_\_\_  
(Street, city, zip)

Number of year with current employer \_\_\_\_\_ Gross Monthly Salary \_\_\_\_\_

(Before taxes and deductions)

#### Parent/Guardian's Current Employer

Name of Parent/Guardian \_\_\_\_\_

Employer \_\_\_\_\_

Occupation \_\_\_\_\_

Address of Employer \_\_\_\_\_  
(Street, city, zip)

Number of year with current employer \_\_\_\_\_ Gross Monthly Salary \_\_\_\_\_  
(Before taxes and deductions)

### SECTION D: Financial Information

What is your yearly household income? \$ \_\_\_\_\_

Are you eligible to receive any social service? (Food stamps, Medicaid, etc.) Yes \_\_\_ No \_\_\_

Please check the services you currently receive: Welfare \_\_\_ Food Stamps \_\_\_ Medicaid \_\_\_

Are you currently receiving assistance from your local Workforce Development office? \_\_\_ Yes \_\_\_ No

Do you receive income from any other source for this student/applicant? (Social Security, child support, etc.)? \_\_\_ Yes \_\_\_ No

If Yes, please list type of support and amount per month \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



Do you or the student/applicant have a savings account?  Yes  No

Approximate balance \$ \_\_\_\_\_

Do you own your own home?  Yes  No

If yes, what is amount of your monthly payment? \$ \_\_\_\_\_

If yes, how much did your house cost? \$ \_\_\_\_\_

Do you rent? Yes  No  If yes, what is the amount of your monthly payment? \$ \_\_\_\_\_

How long at current address? \_\_\_\_\_

Will the student be the first in family to attend college?  Yes  No

Please list all special family situations that might be relevant (serious illness in the family, loss of employment, DCF involvement, homelessness, etc.).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I understand that the information contained in this application is accurate and will be shared with the In-Demand Careers Scholar selection committee and the implementers of the program. I also verify that my child meets the program income requirements. I understand that any false information in this application may result in my child losing his or her eligibility in the program.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent/Guardian Signature

Once you and your child have completed and signed the application, please attach a copy of your 2017 federal income tax return(s) and the most recent month's paystubs or other proof of income. Also attach proof of child's legal residency (copy of social security card, birth certificate, US Passport or government issued photo ID card).

*A copy of your child's grades, attendance, and behavior records will be attached to this form*

<b>For Official Use Only:</b>		
<input type="checkbox"/> Application reviewed by staff	Eligible <input type="checkbox"/>	Not eligible <input type="checkbox"/>
<input type="checkbox"/> Income eligibility confirmed by staff		
_____ Staff Signature	_____ Staff Title	_____ Date

**SECTION E: Student Information-To be completed by student**

We recommend that you use a separate sheet of paper to type your answers to the following questions. Please ensure you attach all supplemental sheets to the application. **Please type or complete using blue or black ink.**

***Scholarship applications are reviewed for completeness and ability to follow the provided instructions. The essay is scored by a community-based selection committee which will focus on the following factors: formatting requirements, grammar and direct essay response. Incomplete applications will not be considered.***

- 1) What are your aspirations for your education?
- 2) Why is including entrepreneurship in your post high school studies important to you?
- 3) What entrepreneur (living or past) has made contributions to our community that impact you and your family and how?

**SECTION F: Parent/Guardian Statement (To be completed by parent(s)/guardians(s))**

(Attach another sheet if necessary).

Apart from financial considerations, how can this opportunity benefit your child? Please include aspirations and hopes for your child’s future and how this program could assist your child in this fulfillment.

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**Please submit completed applications to the  
Education Foundation of Sarasota County no later than **November 2, 2018****

**For your application to be considered complete it must include:**

- Student and parent signatures
- Signed "Information Release" form
- Signed "Commitment of Agreements"
- Parent and Student Essays (attach additional sheets if needed)
- Copy of parent's **2017** Tax Return
- Parents' last two month's paystubs or other proof of income
- Copy of student's birth certificate, permanent resident card, US passport, or certificate of naturalization
- Copy of student's transcript (Unofficial is acceptable)
- Completed teacher/program advocate certification form
- One letter of recommendation from a current teacher
- Copy of student's Social Security card
- **Return the completed application packet by **Friday, November 2, 2018** to the  
Education Foundation of Sarasota County  
1960 Landings Blvd.  
Suite 120  
Sarasota, Florida 34231**
- **ATTN: Suzanne Burke**