



February 3, 2010

Dear Colleague,

We are pleased to send you the application for the HOPE Scholarship for the 2010-2011 academic year. We continue to look for your talented students to apply. The general criteria remain the same from previous years. We are looking for academically talented, low income students who need this assistance to help them obtain their dream. Priority is given to first generation college students. This is NOT a minority scholarship. We encourage ALL students who meet the criteria to apply. The deadline for submission of the completed application is Friday, February 26, 2010. For questions and/or concerns please contact me directly at 239-489-9274.

Sincerely,

A handwritten signature in blue ink that reads "Patricia Newell". The signature is written in a cursive style and is set against a light gray rectangular background.

Patricia Newell  
District Dean, Academic Success Centers



## **Project HOPE Scholarship Program Information Sheet**

### **What is Project HOPE?**

The Project HOPE (Help One Person Excel) Scholarship Program awards a limited number of academic scholarships for students who meet certain eligibility criteria to complete their Associate's degree from Edison State College.

### **What does the scholarship pay for?**

The scholarship supplements any federal aid students receive to cover in-state tuition, fees and textbooks up to 30 credit hours per academic year. Project HOPE Scholars also receive a \$1000 stipend each semester for the Fall and Spring semesters if they fulfill all requirements each semester. The scholarship will **NOT** pay for multiple attempts in any class, only first attempts will be paid for with Project HOPE money.

### **What are the eligibility criteria to participate in the Project HOPE Scholarship?**

- Applicants must be a graduating high school senior this academic year (2009-2010).
- Applicants must be US Citizens or must meet the requirements of an eligible non-citizen as defined by the Federal Financial Aid Program.
- Applicants must have a personal situation placing them "at-risk" for attending college due to their family's financial situation and/or other reasons.

### **Is there any additional information that is taken in to consideration?**

- Applicants who are considered to be a first generation college student (neither of their parents graduated from a four-year college or university with a Bachelor's degree).

### **Is this a minority scholarship?**

No, this is not a minority scholarship. All students who meet the eligibility criteria are encouraged to apply.

### **What requirements do Project HOPE Scholars have to sustain?**

- Scholars must maintain a 12 credit hour course load in the Fall and Spring semesters.
- Scholars must maintain a 2.5 GPA on all college course work completed to be eligible for the full amount of the scholarship.
- Scholars are required to enroll in the College Success Skills Class for the Summer B semester before their first fall term and earn a "C" or better.
- Scholars must complete the Free Application for Federal Student Aid (FAFSA) each academic year by March 1<sup>st</sup>.
- Scholars are required to attend regular Project HOPE meetings and to participate in campus social, educational and/or community service projects.

### **When is the application due?**

The application and all supporting documents are due by Friday, February 26, 2010. Incomplete applications will **NOT** be reviewed.



**Project HOPE Scholarship Program  
Application Instructions & Checklist**

**APPLICATION DEADLINE: FEBRUARY 26, 2010**

- Complete the Project HOPE Scholarship Application. The application must be typed or legibly written.
- Attach a typed two page Personal Statement. The font should be Arial or Times New Roman, not more than 12 point font. Include one paragraph addressing each of the following questions:
  - a. Why you should be selected for this program?
  - b. What are your academic strengths and weaknesses?
  - c. What are your career goals?
  - d. What extenuating circumstances might prevent you from entering college?
  - e. Please list your work experiences (including amount of hours worked per week), community service activities and leadership activities.
- Attach the sealed Recommendation Form that must be completed by the High School Principal, Assistant Principal, Dean, Guidance Counselor or Teacher.
- Attach an official copy of your high school transcript.
- Attach a completed Edison State College Admission Application. No application fee is required at this time.
- Submit the completed application and additional materials to:

Patricia Newell  
District Dean, Academic Success Programs  
Edison State College  
8099 College Pkwy  
Fort Myers, FL 33919  
(239) 489-9274  
e-mail [amfike@edison.edu](mailto:amfike@edison.edu)

*Partially completed applications and/or missing additional materials will NOT be reviewed.*

**LETTERS ARE PLANNED TO BE MAILED TO THE CANDIDATES SELECTED  
TO BE INTERVIEWED BY FRIDAY, MARCH 5, 2010.**

*Edison State College is an Equal Access, Equal Opportunity Institution. Programs, activities and facilities of the college are available to all on a non-discrimination basis, without regard to race, color, religion, sex, age, disability, marital status and national origin. Questions pertaining to educational equity, equal opportunity or equal access should be addressed to the District Director of Human Resources.*



## Project HOPE Scholarship Program Application

Please type or print legibly.

### PERSONAL INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Birthday: \_\_\_\_\_

Race:  African American  Asian  Caucasian  Hispanic  Native American  Other

Primary Language: \_\_\_\_\_ Any other languages: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: ( ) \_\_\_\_\_ Alternate Number: ( ) \_\_\_\_\_

What is the highest level of education completed by your parent(s):

Mother:  Elementary  Middle School  High School  Vocational  College

Father:  Elementary  Middle School  High School  Vocational  College

Estimated annual household income: \$ \_\_\_\_\_ How many people live in your household? \_\_\_\_\_

*Please answer the questions below by checking the appropriate box:*

Yes  No Have any of your siblings graduated from a four-year or two-year college or university?

Yes  No Are you a US Citizen or do you meet the requirements of an eligible non-citizen as defined by the Federal Financial Aid Programs?

Yes  No Does your personal situation place you "at-risk" for attending college due to your family's financial situation or other reasons?

Yes  No Are you a first generation college student? (Neither of your parents graduated from a four-year college or university)

Yes  No Are you eligible for free or reduced lunch?

Community Activities: \_\_\_\_\_

Work Experience (Past & Present): \_\_\_\_\_

**EDUCATIONAL INFORMATION**

High School Attended: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

High School Counselor: \_\_\_\_\_

High School GPA: \_\_\_\_\_ ACT Score (if available): \_\_\_\_\_ SAT Score (if available): \_\_\_\_\_

Campus you plan to attend:     Lee             Collier             Charlotte             Hendry/Glades

Intended College Major(s): \_\_\_\_\_

School Activities : \_\_\_\_\_

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My signature indicates that I understand the Project HOPE Scholarship Program requirements and the information contained in this application is true to the best of my knowledge. I also affirm that the attached essay was composed by me.

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

**APPLICATION DEADLINE: FRIDAY, FEBRUARY 26, 2010**

**Partially completed applications and/or missing materials will NOT be reviewed.**

Submit the completed application and additional materials to:

Patricia Newell

District Dean, Academic Success Programs

Edison State College

8099 College Pkwy, S262

Fort Myers, FL 33919

(239) 489-9274

e-mail [amfike@edison.edu](mailto:amfike@edison.edu)



## Project HOPE Scholarship Program Recommendation Form

Please type or print legibly.

Instructions:

To be completed by the applicants high school principal, assistant principal, dean, guidance counselor or teacher. Please complete the following recommendation form. Once completed seal it in an envelope and return it to the student to be turned in with their application.

Applicants First Name: \_\_\_\_\_ Applicants Last Name: \_\_\_\_\_

Applicants Social Security Number: \_\_\_\_\_ Applicants Birthday: \_\_\_\_\_

High School: \_\_\_\_\_

School Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

High School Staff Member: \_\_\_\_\_

Capacity in which you know the applicant: \_\_\_\_\_

Telephone Number: ( ) \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Please rate the applicant on the qualities listed below using the following numeric scale:

**5** – Excellent **4** – Good **3** – Average **2** – Fair **1** – Poor

	Academic Promise		Career Goals		Attitude		Self-Discipline
	Initiative		Responsibility		Respect		Perseverance

Comments :

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