October 2021

THE LINCOLN/WILLIAM GRANT SCHOLARSHIP FOUNDATION, INC¹.

P. O. Box 12055 Covington, Kentucky 41012 www.lincolnwilliamgrantscholarship.org



Application for The Lincoln/William Grant Legacy Scholarship Awards, The Dr. Nancy C. Riley Walton Memorial Scholarship Awards, And The Charles F. James, Sr. Scholarship Awards

The application and required documents/attachments must be mailed to:

Chair of The Scholarship Committee
The Lincoln/William Grant Scholarship Foundation, Inc.
PO Box 12055
Covington, KY 41012

APPLICATION MUST BE POST MARKED ON OR BEFORE: March 31, 2022

The Scholarship Fund of **The Lincoln/William Grant Scholarship Foundation, Inc.** was established to assist aspiring youth who express a desire and demonstrate preparation for attendance at an accredited University or College.

The Foundation is offering the following scholarship awards for 2022:

- (1) The Lincoln/William Grant Legacy Scholarship Award (\$1,000) for generational descendants of affiliates of the former Lincoln-Grant or William Grant High School in Covington, KY. (Two \$1,000 scholarship awards are available for 2022).
- (2) The Dr. Nancy C. Riley Walton Memorial Scholarship Award (\$1,000) for any qualifying graduating senior or undergraduate college student. (No family relationship to former affiliates of the former Lincoln-Grant or William Grant High School is required for this scholarship award). (Two \$1,000 scholarship awards are available for 2022).
- 2) The Charles F. James, Sr, Scholarship Award (\$1,000) for any qualifying graduating senior or undergraduate college student. (No family relationship to former affiliates of the former Lincoln-Grant or William Grant High School is required for this scholarship award). (Two \$1,000 scholarship awards are available for 2022).

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¹ Image of Lincoln-Grant School Building Courtesy of Kenton County Public Library, Covington, KY

Students who complete the following application will be considered for either The Lincoln/William Grant Legacy Scholarship Award (\$1,000), The Dr. Nancy C. Riley Walton Memorial Scholarship Award (\$1,000), or The Charles F. James, Sr. Scholarship Award (\$1,000)

GENERAL REQUIREMENTS FOR EACH APPLICANT:

- A. Applicants must be a prospective high school graduate or enrolled in a regionally accredited two-year or four-year college or university program. High school applicants must be currently enrolled in high school with satisfactory progression toward graduation in the year the scholarship is awarded.
- B. Applicants MUST submit an official transcript of their academic records from the high school or college in which they are enrolled. High school students must have a MINIUM 2.5 grade point average. College or university students must be in good academic standing at their institution.
- C. Applicants must submit three (3) letters of recommendation, on original letterhead and signed. At least one letter of recommendation must be from a high school educator or college official. NOTE: Each letter must be signed by the writer and contain information on letterhead.
- D. High school applicants must submit official documentation that he or she will be attending a specific college: Letter of acceptance, financial aid awarded, payment of tuition, dorm assignment, and a class schedule.
- E. Applicants must use funds for undergraduate studies only.
- F. Verification of family income will be requested.
- G. <u>Essay Requirement (500 WORDS OR LESS)</u>: On a separate sheet of paper, please give a brief description of your family background, and indicate why you want to attend college. Include your personal, professional goals for the future, and your plans after receiving a college degree.

The applicant must complete this application in its entirety. Please do not leave any answers blank. Submission of the signed application affirms that all information in this application, to the best of your knowledge, is correct.

APPLICANT INFORMATION:

NAME (Please print):		
(Last name)	(First name)	(Middle name)
ADDRESS:		
(Street)	(City)	(State) (Zip Code)
PHONE:		
EMAIL:		
	/ / / .E:FEMALE:	
NAME OF PARENT O		
	IAN'S ADDRESS and zip code:	
Home Telephone		
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NAME(S) OF THE LINCON-GRANT OR WILLIAM GRANT HIGH SCHOOL RELATIVE(S) FROM WHOM YOU ARE DESCENDED, OR WITH WHOM YOU ARE OTHERWISE AFFILIATED. (Required for Legacy Scholarship Awards only):

	D FAMILY ANNUAL INCOME RANGE (Please check of
	Less than \$25,000
	\$25,000 - \$50,000
	\$50,000 -\$75,000
	\$75,000 - \$100,000
	\$100,000 or more
	OTHER DATA OF INFORMATION REQUESTED.
	OTHER DATA or INFORMATION REQUESTED:
Each item be	OTHER DATA or INFORMATION REQUESTED: ow requires a response. <u>PLEASE</u> answer in complete sente
1. Explain	ow requires a response. <u>PLEASE</u> answer in complete sente
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3.	List your extra-curricular high school activities below.
W	What effect did they have on your growth? Why did you choose these activities?
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of my know or circumst Furthermon for a compl considered	rtify that the information provided in this application is, to the best vledge, true and correct. I have not knowingly withheld any facts cances that could otherwise jeopardize consideration of this application. re, by signing this application, I understand that <u>ALL</u> items required lete application must be included with this application in order that I may be for a Lincoln/William Grant Legacy Scholarship Award or a Dr. Nancy C. on Memorial Scholarship Award.
	Date
Print Name	:
Parent/Gua	ardian's Signature (If applicant is under 18):
members of	The information provided in this application will be disclosed only to the board the LINCOLN/WILLIAM GRANT FOUNDATION, INC. as required to determine the ligibility for a scholarship.
PLEASE RI	EVIEW YOUR ENTIRE APPLICATION THOROUGHLY BEFORE MAILING.