**2023 Ronald and Grace Watson**

**Kappa Youth Development, Inc. Scholarship**

**Guidelines**

Kappa Youth Development, Inc. in conjunction with Ronald and Grace Watson will be awarding a scholarship designed to support a graduating high school African American Student (Male or Female) that will major in Education (Early Childhood, Elementary Education, Special Education, Secondary Education, Counseling).

The applicant must:

1. Have attained a minimum cumulative high school G.P.A. of 2.5.

2. Must live in Prince Georges, Charles, Calvert or St. Mary’s County.

3. Attend a four-year college or university during the 2023-2024 academic school year.

Eligibility

In order to be eligible for the 2023 Ronald and Grace Watson Scholarship, applicants must:

1. Be a graduating high school senior.
2. Have a minimum GPA of 2.5 on a 4.0 scale
3. Apply and provide proof of acceptance to a four-year college or university.

Criteria

In order to be considered for the award, all applicants must submit the following information:

From Applicant:

1. The completed scholarship application – **typed** and signed, an electronic signature is acceptable.
2. Completed application essays – the **typed** Essays are limited to 500 words. (See section 11 for more details)
3. Student resume (1-2 pages) - outlines leadership, extracurricular activities, work experience, and awards received.
4. College information sheet – includes list of colleges or universities accepted to, intended major, career interests.
5. Acceptance letter from college or university.
6. A copy of your high school transcript **must be included** with your scholarship application.

**The application submission deadline is 11:59 PM on** ***May 19, 2023*** to be received by the Kappa Youth Development, Inc. Late or incomplete applications will not be accepted.

One copy of the completed scholarship application package should be emailed to: **KYDInc1994@gmail.com**

The application will be reviewed and the recipient selected by a committee consisting of volunteers from the Kappa Youth Development, Inc. Scholarship Committee.

**2023 Scholarship APPLICATION**

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| Please **type** your answers. | | |
| 1. | First Name: | Last Name: |
| 2. | Mailing Address Street:City: State: Zip: | |
| 3. | Telephone Number:  Email Address: | |
| 4. | Date of Birth: Month Day Year Gender: | |
| 5. | Cumulative Grade Point Average (GPA): \_\_\_\_\_\_\_\_\_\_(On a 4.0 scale)  Must include first semester senior year of your most recent high school transcript. | |
| 6. | Are you the first person in your family to attend college: YES \_\_\_ NO \_\_\_\_ | |
| 7. | Name and location of High School attending: | |
| 8. | A. List any academic honors, awards and membership activities while in high school:  B. List your hobbies, outside interests, extracurricular activities and school related volunteer activities:  C. List your non-school sponsored volunteer activities in the community: | |
| 9. | 1. If you have decided on what college you will attend, please list school name: 2. If you have not decided, please list your top 3 college choices: 3. Intended Major: 4. What are your career goals? | |
| 10. | Give a brief description of a volunteer experience that you believe has been most meaningful and impactful to your life: | |
| 11. | **On a separate sheet please write an essay (500 words or less) answering the questions below:**  ***Essay: Describe your reasons for wanting to attend the specific school you’re applying to. Who or what factored into your decision?*** | |
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### STATEMENT OF ACCURACY FOR STUDENTS

I hereby affirm that all of the above stated information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship winner my picture may be taken and used to promote the Kappa Youth Development, Incorporated Scholarship Program. (Applicants may waive photo due to unusual or compelling circumstances.)

I hereby understand that if chosen as a scholarship winner, it is my responsibility to remit to Kappa Youth Development, Incorporated the appropriate information for my scholarship to be paid directly to the student after confirmation is received from the educational institution.

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

**Signature of scholarship applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Parent or Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Checklist**

\_\_\_ Application

\_\_\_ Essay

\_\_\_ Resume/Activity Sheet

\_\_\_ School Transcript

\_\_\_ Acceptance Letter

**EMAIL COMPLETE APPLICATION PACKAGE TO:**

**KYDinc1994@gmail.com**