



Daniel DePasquale Educational Scholarship

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Blue Valley Community Action Partnership is pleased to offer the Daniel DePasquale Educational Scholarship on behalf of Mr. DePasquale. Mr. DePasquale, formerly of Crete, Nebraska, is a long time educator and administrator. The scholarship will be in the amount of \$1,000 and can be used for tuition, books and fees associated with enrollment.

ELIGIBILITY REQUIREMENTS

To be considered for this scholarship, an applicant must meet the following criteria:

- Applicant must be enrolled in Crete Public Schools.
- College program of study: a two-year degree in trades; or a four-year degree in science or humanities.
- Volunteer Community Service will be considered as extremely important.
- Applicants must meet the Income Guidelines (see page 2 of 2).
- Applicant must return the completed application packet to BVCA Partnership (address on page 2 of 2). Packets must be received or postmarked on or before February 1, 2018. For a packet to be considered complete, the applicant must do the following:
 - ✓ Applicant must complete the Daniel DePasquale Educational Scholarship Application (page 2 of 2).
 - ✓ Applicant must compose and include with the application a narrative. The applicant must follow the Narrative Guidelines below.
 - ✓ Applicant must include with the application three (3) Letters of Recommendation from non-relatives. Letters of Recommendation must be typed and emphasize among other things, Community Service.

NARRATIVE GUIDELINES

Narratives must be double-spaced and no more than two (2) pages long. Typed narratives are preferred, but not required. If typing, please use a font type and size that can be read easily. Applicants must include the following:

- A brief biography.
- Discuss aspirations and goals for furthering their education.
- Briefly state their need for financial assistance.
- Describe their volunteer experiences with BVCA Partnership or other community organizations.
- If applicable, how they and/or their family have been assisted by BVCA Partnership in the past.

SELECTION PROCESS

The Blue Valley Community Action Partnership Board of Directors' Scholarship Committee will review all completed application packets and select the recipient. The selection announcement will be sent out in a Press Release on May 1, 2018. The recipient will be notified directly by BVCA Partnership. All scholarships must be utilized within 15 months of the date on the award letter.

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APPLICATIONS MUST BE RECEIVED OR POSTMARKED ON OR BEFORE FEBRUARY 1, 2018

Please mail or fax completed application packet to:

Blue Valley Community Action Partnership • Attention: Heather Lytle, Administrative Director
P.O. Box 273 • Fairbury, NE 68352 • Fax: (402) 729-2801 • Phone: (402) 729-2278 EXT. 122

Please type or neatly print in black ink.

Applicant's Full Name: _____

Applicant's Mailing Address: _____

City: _____ State: _____ Zip: _____ County: _____

Applicant's Phone: (____) _____ E-Mail Address: _____

Currently enrolled in Crete Public Schools in Crete, Nebraska: __ Yes __ No

Institution of Higher Education you plan to attend: _____

Field of Study: _____

Please declare your household income (must fall at or below 250% of poverty to be considered):

Household Size	Year	Month	Check One:
1	\$30,150	\$2,512	<input type="checkbox"/>
2	\$40,600	\$3,382	<input type="checkbox"/>
3	\$51,050	\$4,254	<input type="checkbox"/>
4	\$61,500	\$5,124	<input type="checkbox"/>
5	\$71,950	\$5,994	<input type="checkbox"/>
6	\$82,400	\$6,866	<input type="checkbox"/>
7	\$92,850	\$7,736	<input type="checkbox"/>
Additional Member	+\$10,450	+\$870	<input type="checkbox"/> \$_____

If you agree to the below requirements, please sign and date the bottom of this application.

- * I meet all eligibility requirements outlined on page one of this scholarship application.
- * If selected, I will complete and return BVCA's Scholarship Disbursement Form within 15 months of the date on the award letter. Funds will be disbursed directly to the college of my choice. I understand that if I do not utilize my scholarship within that 15 month timeframe, it will be forfeited.

Applicant's Signature: _____ Date: _____

