



# 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 for a minimum of two years and graduate from Crete High School in the Spring of 2017.
- College program of study: a four-year degree in the field of education.
- A minimum enrollment of 12 credit hours per semester (full-time student) at Doane College or a two-year community college (priority will be given to Doane applicants).
- 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, 2017. 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. Selection announcements will be sent out in a Press Release on May 1, 2017. Recipients 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, 2017**

*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: \_\_\_\_\_

Number of Years Enrolled in Crete Public Schools in Crete, Nebraska: \_\_\_\_\_

Institution of Higher Education you plan to attend: \_\_\_\_\_

Field of Study: \_\_\_\_\_

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

Household Size	Year	Month	Check One:
1	\$14,850	\$1,237	<input type="checkbox"/>
2	\$20,025	\$1,668	<input type="checkbox"/>
3	\$25,200	\$2,100	<input type="checkbox"/>
4	\$30,375	\$2,531	<input type="checkbox"/>
5	\$35,550	\$2,962	<input type="checkbox"/>
6	\$40,725	\$3,393	<input type="checkbox"/>
7	\$45,912	\$3,826	<input type="checkbox"/>
Additional Member	+\$5,200	+\$433	<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: \_\_\_\_\_

