

habele

Student Scholarship Application
www.habele.org | 701 Gervais St, Ste 150-244, Columbia, SC 29201

Choose One: _____ *I am seeking a new scholarship* -or- _____ *I want to renew an existing scholarship*

STUDENT

First Name Middle Name Last Name

School Name (for Scholarship) Grade (next school year)

Gender Date of Birth Home Island

Social Security or Passport Number

Other Schools Previously Attended (list names and grade levels)

PARENTS/GUARDIANS

First Name Middle Name Last Name

First Name Middle Name Last Name

Mail Address

Email Address Phone Number

Family's "Home Island" Family's Current "Island of Residence"

SCHOOL

Name of School for Scholarship

Name of School Accountant or Treasurer Email Address

School's Mailing Address

School's Email Address Phone Number

Estimated Total of Student's Tuition and Fees for School Year

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HOUSEHOLD

List the name, age and relationship (to the student) of ALL of the persons who live and eat at the house, residence or compound where the student now lives and eats. For those persons with jobs indicate their estimated annual income. If family receives additional cash income from someone not living at the residence then please indicate source and level of that income.

Name	Age	Relationship	Income
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Name	Age	Relationship	Income
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Name	Age	Relationship	Income
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Name	Age	Relationship	Income
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Name	Age	Relationship	Income
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Name	Age	Relationship	Income
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Name	Age	Relationship	Income
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Name	Age	Relationship	Income
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Name	Age	Relationship	Income
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Name	Age	Relationship	Income
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Name	Age	Relationship	Income
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Name	Age	Relationship	Income
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Name	Age	Relationship	Income
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Name	Age	Relationship	Income
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Name	Age	Relationship	Income
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Other Income Sources	Amount Per Year
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Other Income Sources	Amount Per Year
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CONTRACT

If I receive a scholarship, grant, award, or donation I agree to ALL of the following (initial each)

To the best of my knowledge all the information I have provided is correct. _____

The student or family will provide ***copies of all report cards*** and discipline reports to the Habele Outer Island Education Fund. _____

The student will provide ***one letter and one additional photograph*** to the Habele Outer Island Education Fund prior to December 31st of the year a scholarship is received. _____

I will immediately notify the Habele Outer Island Education Fund of any changes to my (or the student's) status or the information that I have provided. _____

I recognize the authority of the Habele Outer Island Education Fund to rescind or reclaim and funds or material in the event that any funds or materials have been misused or misdirected, or *appears* to have been misused or misdirected, or which were received as the result of information that was known to be false when provided. _____

ATTACHMENTS

These materials must either be sent with the scholarship application or sent by the school the student is planning to attend. Applications without all attachments will not be considered. Even if the school promises to mail, fax, or email the materials, the student's parents or sponsors remain responsible for ensuring those materials reach Habele.

_____ **Acceptance letter or letter of enrollment at school**

_____ **Student's academic transcript**

_____ **Photograph of student (3x5 or larger)**

_____ **Copies of W-2 Form(s) or recent check stub(s) from all family member(s) or sponsor(s) listed in the "Parents/Guardians" and "Household" boxes.**

SUBMISSION

This application must be sent to Habele **no later than July 1st** of the summer before the school year begins. Habele works to announce scholarship awards during the first two weeks of August. Checks will be mailed directly to schools.

Applications can be submitted by mail to:

*Habele Outer Island Education Fund
701 Gervais Street, Suite 150-244
Columbia, South Carolina 29201*

Or by email:

njm@habele.org

Students who are awarded scholarships must reapply each year in order to renew their scholarships.

