



Karen E. Gordon Scholarship

CEO provides services that empower people to develop independence in all life areas. CEO gives people the tools they need to build financial stability and lead healthier, happier lives. Our programs work with individuals, families and the larger community to improve quality of life by meeting social, emotional, financial and educational needs.

CEO's programs are designed to be stepping stones to long-term success. They focus on education, skill building, and connecting people to resources they need. Our goal is to break the cycle of poverty by targeting poverty at its root causes – removing barriers and supporting change.

To further support the educational and employment success of participants in CEO programs and services, CEO has made available a scholarship fund to benefit CEO participants who are current or potential students in post-secondary education or training programs.

Eligibility

- Applicants must be current or past participants in a CEO program/service.
- Applicants must be currently attending or planning to attend a higher education college, university or training program (within 6 months of date of award).
- Applicants must complete the full scholarship application including all relevant information, and submit a signed Media Consent Form. The Media Consent Form will permit the agency to use the applicant's name, likeness and story for publicity.
- CEO employees who meet the criteria listed above are eligible to apply.

Additional Details

- Priority will be given to first time applicants with good academic achievement, community involvement or financial need.
- In accepting the award, the applicant must agree to CEO using his/her name and likeness for publicity without any additional consideration. S/He also agrees to attend the Community Action Luncheon if available, to be held on Thursday, May 21, 2015 to accept this award.
- A Selection Committee will be formed by CEO to determine which of the applicants will be awarded the scholarship and the decision of the committee is final. *A decision will be made by Monday, May 4, 2015.* The Selection Committee reserves the right to refuse an award if no applicant is qualified.
- A total scholarship in the amount awarded will be submitted directly to the college, university or training program, upon proof of enrollment.



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Submission

- Applicants must submit their application by *Wednesday, April 15, 2015*.
- *Applications received after this date will not be considered.*
- Applications should be submitted to Leah Carroll, Development Manager, via mail or email.

Mailing Address:

*Leah Carroll
Development Manager
CEO
2331 Fifth Avenue
Troy, NY 12180*

Email Address:

lcarroll@ceoempowers.org

- Any questions related to the application can be directed to Leah Carroll, Development Manager, at 518-272-6012.



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Part I: Personal/Educational Information

STUDENT NAME: _____ DATE: _____

PARENT/GUARDIAN NAME (If under 18): _____

ADDRESS: _____ CITY: _____ STATE: _____

HOME PHONE: _____ CELL PHONE: _____

FAMILY INCOME (please check one):

- | | | |
|--|--|---|
| <input type="checkbox"/> \$0 - \$25,999 | <input type="checkbox"/> \$46,000 - \$65,999 | <input type="checkbox"/> \$86,000 - \$100,000 |
| <input type="checkbox"/> \$26,000 - \$45,999 | <input type="checkbox"/> \$66,000 - \$85,999 | <input type="checkbox"/> Over \$100,000 |

SCHOOLS ATTENDED (please give a chronological listing of schools attended):

	NAME	DATES ATTENDED	DEGREE/CERTIFICATE RECEIVED (if applicable)
ELEMENTARY SCHOOL			
MIDDLE SCHOOL			
HIGH SCHOOL			
COLLEGE			
TRAINING/ ALTERNATIVE EDUCATION PROGRAM			
OTHER			



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Part II: Activity Profile

Please list all extracurricular, school or community activities in which you participated indicating the year(s) involved and leadership position, if applicable.

Activity/Organization Name

Dates Involved

SCHOOL ACTIVITIES:

COMMUNITY ORGANIZATIONS:

HONORS, AWARDS AND CERTIFICATIONS RECEIVED:



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Part III: Employment

(Please list all employment, dates employed and duties):

EMPLOYER: _____ DATES EMPLOYED: _____

DUTIES: _____

Please check if you are a CEO employee.

EMPLOYER: _____ DATES EMPLOYED: _____

DUTIES: _____

EMPLOYER: _____ DATES EMPLOYED: _____

DUTIES: _____

EMPLOYER: _____ DATES EMPLOYED: _____

DUTIES: _____

EMPLOYER: _____ DATES EMPLOYED: _____

DUTIES: _____

EMPLOYER: _____ DATES EMPLOYED: _____

DUTIES: _____



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Part IV: Essay

Please include a brief essay in response to the following (approximately 250-500 words in total):

- ✓ The impact CEO had on your life and/or a description of obstacles or hurdles you may have faced and had to overcome and;
- ✓ The goals you hope to achieve, if awarded this scholarship.

Please list the name of the higher education institution or training program you are currently attending or plan to enroll in.

COLLEGE OR UNIVERSITY: _____

MAJOR: _____

-OR-

TRAINING PROGRAM: _____

Part V: Acknowledgements

I acknowledge that I understand this form completely and that I will be held accountable for the information outlined above. I authorize CEO to contact any and all individuals, organizations and/or educational institutions in order to verify information provided in this application.

SIGNATURE

DATE

PARENT/ LEGAL GUARDIAN SIGNATURE
(if applicant is under the age of 18)

DATE

HOW/WHERE DID YOU FIND THIS SCHOLARSHIP? _____
