**Chevron Richmond**

**2018 Black History Awareness Committee (BHAC)**

 **Dr. William F. King Scholarship**

**2018 Application – Due by Tuesday, January 23, 2018**

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| **Student Profile** |
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|  |  |
| Name:  |  Email Address: |
|  |  |
|  |  |
| Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender: | □ Female □ Male |
|  |  |
| Home Address:  |  |
|  |  |  |
| City:  | State:  | Zip:  |
|  |  |
| Phone Number: ( )High School Name:  |  |
|  |  |  |
| Address: |  |  |
| City:  | State:  | Zip:  |
|  |  |
| Are you a child or dependent of a current Chevron employee? □ Yes\* □ No (\* Children of current Chevron employees and/or contractors are not eligible for this scholarship)How did you hear about this scholarship? □ College Counselor □ Academic Advisor □ Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Which colleges or universities are you interested in attending in 2018? (List your top 3 choices): 1) State: \_\_\_\_\_\_\_2) State: \_\_\_\_\_\_\_ 3) State: \_\_\_\_\_\_\_

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| **Extracurricular & Community Service Profile**  |

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**Briefly describe your top three (3) leadership activities and experiences & hours worked**  **hrs/wk #-wks/yr**

**(e.g….. Organization/ Your Role/Activity)**

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| --- | --- |
| 1.  |  |
|   |  |
| 2.  |  |
|    |  |
| 3.  |  |
|   |  |

**Describe your community involvement and extracurricular activities**: **hrs/wk #-wks/yr**

**(These activities should be different than your leadership activities previously listed)**

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| --- | --- |
| 1.  |  |
|   |  |
| 2.  |  |
|    |  |
| 3.  |  |
|   |  |

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| Essay |

Write a 500-750 word essayon **ONE** of the following **THREE** topics. **Write your name and essay topic number** in the top left corner of the essay. Attach your double spaced, typed essay to your application. *Essays will be judged on content, originality, creativity, grammar, and punctuation.*

***Note: Scholarship Recipients’ are not eligible to receive more than one Diversity Chevron Sponsored Scholarship****.*

1. Describe a past event in African American History that has impacted (positively or negatively) your life or your family’s life?
2. Explain how your current extracurricular or community service activities are used to positively impact your community.
3. How do you plan to use your academic and/or leaderships skills to enrich the future?

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| **Required Letter of Recommendation** |

Include a reference letter from your teacher, coach, religious (if applicable) or community leader that summarizes their experience(s) with your leadership, community involvement, and extracurricular activities. Please provide the attached “Letter of Recommendation” form (page 4) to your reference/endorser and submit with your completed application.

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| **GPA Disclosure** |

I hereby certify the information provided in this application is, to the best of my knowledge, true and correct. I agree to provide a copy of my transcript to the Scholarship Committee to validate my GPA. Please have your school counselor or registrar sign the application to verify the validity that your GPA is > 2.5 (4.0 scale).

 **Cumulative G.P.A.:**

|  |  |
| --- | --- |
| **Student Signature** | **Date** |

|  |  |
| --- | --- |
| **Counselor or Registrar’s Signature** | **Date** |

|  |
| --- |
| **Mailing & Deadline Information** |

All application components must be emailed in one package **on or before January 23, 2018.** ***Late or incomplete applications will not be considered.***

*Please review your application with your school counselor or advisor. Submit your application via email to:*

**RichmondCE@chevron.com**

Winner Notification – by January 31, 2018

# The awarded scholarship monies may only be used for payment of tuition for study by the winning applicants at accredited colleges or universities during the 2018-2019 academic year.  To be eligible for payment, each winning applicant must provide proof of enrollment at an accredited college or university to RichmondCE@chevron.com by July 1, 2018, showing enrollment for at least 12 credits of study.  After such proof is received, the scholarship monies will be sent directly to the selected college/university.  A scholarship will be forfeited if the winning applicant does not provide such proof of enrollment as noted, and the amount of any scholarship will be reduced if it exceeds the winning applicant’s tuition less any other scholarship or grants.  In the case where a student receives a full tuition scholarship from another source that will cover 100% of their college tuition costs, the BHAC scholarship will be forfeited.

# APPLICATION CHECKLIST

### The student is responsible for submitting all materials on time. Incomplete applications will not be evaluated. This application becomes complete and valid only when the scholarship committee has received all of the following materials:

### Student Application

### Essay

### Letter of Recommendation

### GPA Verification

**Completed Application Due On Or Before**

**January 23, 2018**

Chevron Richmond Black History Awareness Celebration & Scholarship

Annual William F. King Jr. Scholarship

**Letter of Recommendation Form**

(Provide this form to your recommender)

Applicant’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructions to Applicant

You must provide a current, confidential letter of recommendation. The letter may be from an instructor, advisor, coach, community leader, pastor, etc. The letter cannot be from a relative. You should fully apprise your recommender about the Dr. William F. King Scholarship and your reasons for applying. Allow your reference at least two weeks to write the letter. Submit the signed recommendation form with contact information with your application by the **January 23, 2018** (late applications will not be accepted).

Instructions to Applicant’s Reference/Endorser

The person named above is applying for a William F. King scholarship. This scholarship is administered by Chevron’s Richmond Black Employee’s Network. Please type your letter of recommendation on letterhead stationery of your professional or organizational affiliation. We request your candid, written evaluation of the applicant relative to the following:

* Academic record
* Academic plans and career goals
* Personal strengths, including motivation, leadership, and commitment
* Community service and extracurricular activities

The scholarship review committee will use your observations as part of its selection process. The applicant will benefit most from a specific and illustrative evaluation rather than a general assessment. The evaluation should discuss the applicant's strengths and, as appropriate, provide insight to any areas for growth. Please share what criteria you base your judgment upon and how the applicant meets those principles.

Please complete the information below and return this form and your signed letter of recommendation. The scholarship committee appreciates your assistance.

Recommender's name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Professional title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Professional/Organizational Affiliation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_ Zip code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ In what capacity? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_