HOPE ACADEMY
HAWKS

1234 Alphabet Road
Gulfport, MS 39503
(228)539-1234

Scholarship Purpose:

The purpose of the scholarship program is to increase student enrollment in the middle school grades (6-8) while attracting a diverse group of distinguished students who exhibit exemplary scholastic, leadership, athletic, and artistic talents, thus promoting the vision that Hope Academy is a school that provides excellence in education in and beyond the classroom.

Criteria for Consideration:

1. Applicant must be an entering 6th, 7th, or 8th grade student during the 2020-2021 school year.
2. Applicant must submit a completed application with all supporting documentation by July 1,2020.
3. Applicant must be committed to completing one full academic year at Hope Academy. (Families who anticipate a move during the school year will not be eligible for scholarships.)
4. Must be a U.S. Citizen.

Scholarship Obligations:

1. Students must maintain at least a B average in all courses.
2. Students must not pose discipline problems in or outside of school.
3. Families must pay the registration fee ($400), and any remaining tuition balance as outlined in their contract through FACTS online payment platform.
    a. Monthly payments may be arranged for the remaining balance.
4. Guardians must provide transportation to and from school daily.
5. Guardians must attend all requested conferences.
6. Students and guardians must adhere to all policies and procedures set forth in the Hope Academy Contract and Handbook.

Selection and Notification Process:

A rubric will be used to award points based on six (6) standards. The application, supporting documents, reference checks, interviews, and other information will be used to determine points earned.

Scholarship announcements will be made in early Spring. Scholarships will be awarded on a first come, first served basis until all middle school seats are filled to capacity or by July 1, 2020.

Hope Academy admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, sexual orientation, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, athletic, and other school-administered programs.

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Scholarship Application Checklist

Applicants must submit items 1-6. Items 7 and 8 are optional and must be submitted with the original packet. Information may be dropped off at the Hope Academy office in Florence Gardens or mailed directly to Hope Academy.

Required Documents:

1. Completed application
2. Copy of the most recent report card
3. Copy of most recent standardized test scores
4. Three letters of personal reference in sealed envelopes
5. Signed Release of Information form
6. Essay
    - Respond to the prompt: "Explain why you want to attend Hope Academy. Describe the talents, skills, and/or strengths you possess that make you the best student to receive this scholarship."
    - Essay should be 500 words or less, typed, double spaced, and 12-point Times New Roman font.
7. Resume
    - List all extracurricular activities such as clubs, art/music/drama lessons, memberships, etc.
    - For each extracurricular activity include the:
        - number of years of participation.
        - level of participation (recreational, competitive, national, regional, etc.).
        - related skills or responsibilities (point guard, captain, president, lead role, etc.).
        - organization/league (Wings, SMSC, Lyman Youth Football, Boy Scouts of America, etc.).
        - coach or sponsor's name and contact information.

Optional Supporting Documentation

8. Portfolio of work for consideration of artistic ability, including visual displays or recordings of performing arts.
9. Verification of community service

If you have any questions, please do not hesitate to call the school office at 228-539-1234 and speak to Principal Heather Blenden. You may also email questions to principal@hopeacademyfg.org.

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Scholarship Application

Student Applicant Information

Full Name: _____ Date: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____
City *State* *ZIP Code*

Date of Birth: _____ Social Security No.: _____ Grade: _____

Are you a citizen of the United States? YES ☐ NO ☐

Have you ever attended a district hearing for disciplinary reasons? YES ☐ NO ☐

Have you ever attended Hope Academy? YES ☐ NO ☐ If yes, explain. _____

Have you ever been expelled from school? YES ☐ NO ☐

Current School Information

School: _____ Phone: _____

Address: _____ Teacher(s): _____

_____ _____

Principal: _____ Email: _____

Student References

Please list three personal references that are not related to you. Preferable references include administrators, teachers, community leaders, religious leaders, scout leaders, and coaches.

Full Name: _____ Relationship: _____

Organization: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Organization: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Organization: _____ Phone: _____

Address: _____

Parent/Guardian Information

Parent: _____ Date: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____
City *State* *ZIP Code*

Phone: _____ Email: _____

Date of Birth: _____ Social Security No.: _____ Employer: _____

Are you a citizen of the United States? YES ☐ NO ☐ Are you a member of the armed services? YES ☐ NO ☐

Parent: _____ Date: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____
City *State* *ZIP Code*

Phone: _____ Email: _____

Date of Birth: _____ Social Security No.: _____ Employer: _____

Are you a citizen of the United States? YES ☐ NO ☐ Are you a member of the armed services? YES ☐ NO ☐

Disclaimer, Release of Information, and Signature

I certify that my answers to the application and information included in all supporting documents, such as the resume, are true and complete to the best of my knowledge.

If this application leads to the reward of a scholarship, I understand that false or misleading information in my application or supporting documents may result in my release from Hope Academy and forfeiture of all scholarship monies.

I agree to release records pertaining to the applicant's education, including cumulative records, academic records, standardized test scores, and discipline records to Hope Academy. Questions that relate to character, academics, and motivation may be discussed with representatives of Hope Academy via phone, in person, and/or written interviews.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____