

# **ESTHER M. SMITH FUND SCHOLARSHIP FUND**

## **Scholarship Award Guidelines**

A. Choice of School: Accredited four-year college or university, or accredited two-year institution.

B. Who May Apply: Applicants must be Wicomico High School public school graduates with a disability as accepted and defined by the Americans With Disabilities Act (ADA )

C. Qualifications: Students must have maintained a GPA of 2.0 or higher, and been accepted for admission as a full-time student at an accredited four-year college or university, or a two-year education or career training institution.

D. Nature of Award: \$2,000 for one academic year, (\$1,000 per semester).

E. How to Apply: Applications are available at the guidance office of the public high school in Wicomico County where the student is enrolled or on the [www.cfes.org](http://www.cfes.org) website. Completed applications must be submitted to the Scholarship Advisory Committee Chair. (Address indicated on Scholarship Application Form) by no later than April 15<sup>th</sup> to be considered for a scholarship award, only when the following have been submitted:

1. A completed scholarship application.
2. Official high school transcript of grades.
3. Letter of acceptance from college or university.
4. Two letters of recommendation from non-family members (e.g. teacher, guidance counselor, employer, athletic coach, etc.)
5. Successful applicants will be required to be interviewed by the Scholarship Advisory Committee.

**ESTHER M. SMITH FUND  
SCHOLARSHIP APPLICATION**

**Student Name** \_\_\_\_\_  
Last First M.I.

**Permanent Address** \_\_\_\_\_  
Street  
City State Zip

**Telephone** \_\_\_\_\_ **Social Security Number** \_\_\_\_\_

**How long have you been a resident of your County?** \_\_\_\_\_

**High School** \_\_\_\_\_ **Graduation Date** \_\_\_\_\_  
Month/Year

\_\_\_\_\_ Address Telephone

**College or University for which aid is requested** \_\_\_\_\_

\_\_\_\_\_ Address Telephone

**Entrance Date** \_\_\_\_\_

**Required Attachments:**

- 1 – Copy of Letter of acceptance from college or university
- 2 – Two letters of recommendation from non-family members.
- 3 – Copy of official high school transcript of grades.

**Mail Application To:**

**Ms. Kathy Redden  
Esther M. Smith Fund  
1813 Holly Swamp Rd  
Pocomoke, MD 21851**

**APPLICATION DEADLINE: April 15<sup>th</sup>**

I certify that I am a legal resident of Wicomico County, State of Maryland and that all information on this form is true and complete to the best of my knowledge.

\_\_\_\_\_  
Student's Signature Date Parent's / Guardian's Signature Date