

## **John and Hannah Handy Scholarship Scholarship Award Guidelines**

- A. Choice of School: Accredited four-year College or university, or accredited two-year institution.
- B. Who May Apply: Graduating seniors of Crisfield High School have selected their college and have been accepted for admission as a full-time student.
- C. Considerations: Applicant must be of high character, integrity, intelligence and possess the motivation to offer a potential for future leadership. Scholarship award recommendations shall be based on merit, without regard for race, sex, or condition of need.

Each candidate should be able to demonstrate participation in the general activities of school, including, but not limited to, sports, music, and art. Successful candidates must have achieved academic grades and SAT test scores, or comparable tests that demonstrate the student has the necessary academic ability to successfully earn a college or university degree.

- D. Nature of Award: Annual scholarship awards will be a minimum of \$2,000 per academic year.
- E. How to Apply: Applications are available at the Crisfield High School guidance office or at [www.cfes.org](http://www.cfes.org). Completed applications must be submitted to guidance offices no later than April 1<sup>st</sup> of the current school year to be eligible for fall semester assistance. An application is complete, and 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

**The Community Foundation of the Eastern Shore  
John and Hannah Handy Scholarship**

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

**Permanent Address** \_\_\_\_\_  
Street

City State Zip  
**Telephone** ( ) **Social Security Number** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**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** \_\_\_\_\_

**List Extracurricular Activities, Work experience, Community service, Volunteer projects in which you have participated** (attach additional sheet if necessary):

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

\_\_\_\_\_  
Students Signature Date

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