



## 2018 Delegate Harry J. Parrish Community Service Scholarship Application Sponsored by the Parrish Family

The Manassas City Public Schools Education Foundation, Inc. is pleased to offer a \$2,000 scholarship to a graduate of the Manassas City Public Schools who is a proven leader and has been an active participant in community service throughout high school.

### Eligibility

The applicant must be a 2018 graduating senior of the Manassas City Public Schools who intends to graduate from a four year college or university with a degree from a four-year college or university. Applicant must be accepted at an institute of higher learning by June 29, 2018.

### The Applicant

- Must plan to attend a four-year college or university.
- Must have participated in community and school activities (clubs, sports, school, church organizations and community groups) while in high school.
- Must have held a leadership position in two or more different organizations while in high school.
- Must submit recommendations from one teacher and one community service representative.
- Must submit with their application an essay, up to 500 words, describing why community service is important and how they served the community.

### Deadline

Applications must be typewritten and received by **April 13, 2018**. Late applications will not be accepted and applications cannot be faxed. Completed applications may be hand delivered or mailed to one of the addresses below.

#### Can be hand delivered to:

MCPS Education Foundation, Inc.  
c/o MCPS  
8700 Centreville Road, Suite 400  
Manassas, VA 20120

#### Can be mailed to:

MCPS Education Foundation, Inc.  
c/o MCPS  
P.O. Box 520  
Manassas, VA 20108

#### Can be emailed to:

[info@mcpsedfoundation.org](mailto:info@mcpsedfoundation.org)

*If mailed, the post-marked date must be no later than April 13, 2018.*

The Manassas City Public Schools Education Foundation Scholarship Committee will select and announce the recipients in May 2018.

The scholarship award shall be based on merit and qualifications and shall not discriminate against any person on the basis of sex, race, religion, handicap or national origin.

STUDENT NAME \_\_\_\_\_



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**Part I** (Please type)

Name \_\_\_\_\_  
Last First Middle

Home Address \_\_\_\_\_

Home or Cell Telephone Number \_\_\_\_\_

Date of Birth \_\_\_\_\_

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

High School \_\_\_\_\_

Guidance Counselor \_\_\_\_\_

Cumulative High School GPA: \_\_\_\_\_ Rank in Graduation Class \_\_\_\_\_ Out of \_\_\_\_\_  
(number in class)

Date of Graduation \_\_\_\_\_

Name of the College/University \_\_\_\_\_

Address \_\_\_\_\_

**Method of Payment** If you are awarded this scholarship, a check will be forwarded to the school that you will attend. Please indicate (with an X) to which account you would prefer your scholarship award to be applied:

Tuition \_\_\_\_\_ Room and Board \_\_\_\_\_ Textbooks and Supplies \_\_\_\_\_

STUDENT NAME \_\_\_\_\_







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### **Part IV – Essay** (Please type)

On a separate piece of paper, please type an essay up to 500 words describing why community service is important and how you have served the community. Please put your full name on the bottom of the essay page.

**Essays not on the topic and/or exceeding the word limit will NOT be considered.**

### **Part V – Recommendation Letters**

Each applicant must submit one recommendation from a teacher and one recommendation from a community service representative.

On the following pages you will find two copies of the “Recommendation Letter Form” that should be completed by those individuals.

STUDENT NAME \_\_\_\_\_



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## SCHOLARSHIP RECOMMENDATION LETTER FORM (1)

*This student is applying for the Del. Harry Parrish Community Service Scholarship. This scholarship is intended to recognize and reward motivated students who are and have been leaders contributing to their school community and the City of Manassas. The Scholarship Committee appreciates your evaluation of this scholarship applicant's strengths.*

*Please complete the recommendation form below. Your comments are critical to the committee. Attach additional sheets if more space is needed. Your letter will not be confidential. Please return the completed letter to the applicant for submission with the scholarship application packet.*

Recommendation from \_\_\_\_\_

Phone/Ext # \_\_\_\_\_

Title \_\_\_\_\_ Department: \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

<b>Period of association</b> From date: _____ To date: _____	<b>Professional relationship to applicant</b> (check appropriate boxes) <input type="checkbox"/> Teacher <input type="checkbox"/> Faculty Advisor <input type="checkbox"/> Community Service Organization _____ name
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STUDENT NAME \_\_\_\_\_



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### SCHOLARSHIP RECOMMENDATION LETTER FORM (1)

#### Applicant evaluation

Element	Out- standing	Above Average	Average	Below Average	No Basis for rating
Leadership					
Creativity: flexibility, adaptability					
Emotional Maturity: ability to work with and for others and reaction to set-back					
Initiative: motivation and self-starting					
Sense of Humor					
Responsibility: accepting and distributing credit and fault					
Communication skills					
Reliability: ability to work independently and dependability in completing assignment					
Resourcefulness: ability to solve problems					

**Describe the student's strengths.**

**Provide specific examples of the applicant's leadership ability?**

**Provide any other comments about the applicant that you feel the committee should know.**

STUDENT NAME \_\_\_\_\_



# 2018 Delegate Harry J. Parrish Community Service Scholarship Application

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## SCHOLARSHIP RECOMMENDATION LETTER FORM (2)

*This student is applying for the Del. Harry Parrish Community Service Scholarship. This scholarship is intended to recognize and reward motivated students who are and have been leaders contributing to their school community and the City of Manassas. The Scholarship Committee appreciates your evaluation of this scholarship applicant's strengths.*

*Please complete the recommendation form below. Your comments are critical to the committee. Attach additional sheets if more space is needed. Your letter will not be confidential. Please return the completed letter to the applicant for submission with the scholarship application packet.*

Recommendation from \_\_\_\_\_

Phone/Ext # \_\_\_\_\_

Title \_\_\_\_\_ Department: \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

<p><b>Period of association</b></p> <p>From date: _____</p> <p>To date: _____</p>	<p><b>Professional relationship to applicant</b> (check appropriate boxes)</p> <p><input type="checkbox"/> Teacher</p> <p><input type="checkbox"/> Faculty Advisor</p> <p><input type="checkbox"/> Community Service Organization</p> <p>_____</p> <p>name</p>
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STUDENT NAME \_\_\_\_\_





## 2018 Delegate Harry J. Parrish Community Service Scholarship Application Sponsored by the Parrish Family

### SCHOLARSHIP RECOMMENDATION LETTER FORM (2)

#### Applicant evaluation

Element	Out- standing	Above Average	Average	Below Average	No Basis for rating
Leadership					
Creativity: flexibility, adaptability					
Emotional Maturity: ability to work with and for others and reaction to set-back					
Initiative: motivation and self-starting					
Sense of Humor					
Responsibility: accepting and distributing credit and fault					
Communication skills					
Reliability: ability to work independently and dependability in completing assignment					
Resourcefulness: ability to solve problems					

**Describe the student's strengths.**

**Provide specific examples of the applicant's leadership ability?**

**Provide any other comments about the applicant that you feel the committee should know.**

STUDENT NAME \_\_\_\_\_



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## Photographic Consent Form

The undersigned does hereby authorize

### **Manassas City Public Schools Education Foundation**

And/or its associates, assistants, or subcontractors to photograph/film

\_\_\_\_\_  
Name(s)

The undersigned authorizes Manassas City Public Schools Education Foundation to permit the use and display of said photographs in any publication, multimedia production, display, advertisement or World-Wide Web Publication.

The undersigned agrees that Manassas City Public Schools Education Foundation may use name, likeness, or biographical information supplied by the undersigned.

The undersigned releases and forever discharges Manassas City Public Schools Education Foundation, its board members and employees from any and all claims and demands arising out of or in connection with the use of said photographs / images, including but not limited to, any claims for invasion of privacy or defamation.

Accepted and Agreed:

\_\_\_\_\_  
Signature of Subject

\_\_\_\_\_  
Signature of Subject

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date

STUDENT NAME \_\_\_\_\_