



Isle of Wight Community Foundation Scholarship

The Isle of Wight Community Foundation is a 501 (c)(3) not-for-profit corporation created in 2013 for the purpose of receiving, maintaining and administering assets for charitable and educational purposes, by conducting and supporting activities carried out by the Isle of Wight Chamber of Commerce for the benefit of the citizens of Isle of Wight County and the surrounding area. Contributions made to the Community Foundation are tax-deductible.

The Foundation's Board of Directors is made up of business and community leaders with an interest in advancing the quality of life in Isle of Wight County, and promoting a vibrant business environment.

Among the Foundation's first initiatives was a new scholarship fund to assist outstanding high school seniors continuing their education at the college and university level. Scholarships of at least \$1000 each are funded from proceeds generated at a fund-raising event, "Flavors of Isle of Wight," to be held February 28, 2019 at Smithfield Center.

Graduating seniors from Smithfield High School, Windsor High School, the Isle of Wight Academy and home-schooled students are eligible. Scholarship recipients will be announced in May.

2019 Foundation Board of Directors

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Isle of Wight Community Foundation Scholarship Application

Thank you for taking time to apply for an Isle of Wight Community Foundation Scholarship. To ensure we have all the information needed and in the order needed for evaluation, please complete this application in full and follow the instructions along the way. **All applications must be received by the Foundation by 4:00pm on Wednesday, April 17, 2019.**

Once completed, please submit all your information to the Isle of Wight Community Foundation as follows:

By Mail: Isle of Wight Community Foundation
 ATTN: Scholarship Committee
 PO Box 38
 Smithfield, VA 23431

By Email: chamber@theisle.org

By Fax: Isle of Wight Community Foundation
 ATTN: Scholarship Committee
 Fax Number: 757-357-6884

1. Applicant's Full Name:

LAST NAME	FIRST NAME	MIDDLE INITIAL
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2. Applicant's Complete Address:

STREET ADDRESS

STREET ADDRESS (SECOND LINE)

CITY	STATE/PROVINCE	POSTAL CODE/ZIP CODE
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COUNTRY

PHONE	E-MAIL ADDRESS
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3. Date to graduate from high school: _____

4. Date to enter college: _____

5. Name(s) of college(s) applying to:

6. Provide any test scores, such as your official SAT, ACT, or other academic measures. (Please send us a copy of your official scores as soon as you have them.)

Test and Score

Date

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7. List your extracurricular activities (include any descriptions or details as attachments):

8. List the names of your references, limited to three (3) total. (Include actual reference letters as attachments)

9. Essay: Why should the Isle of Wight Community Foundation invest in your continuing education? (*max. 200 words. You may also include the essay as an attachment, limited to one page.*)

14. Are there any general comments you wish to include? (You may also include them as an attachment, limited to one page.)

15. I have submitted a photograph to be used if I am selected as a scholarship winner:

Yes / No *[Please note: We welcome digital photos.]*

16. I have signed and submitted the attached "Assignment of Rights & Consent to Publish Scholarship Information": Yes / No

ASSIGNMENT OF RIGHTS & CONSENT TO PUBLISH SCHOLARSHIP INFORMATION

KNOW ALL PERSONS BY THESE PRESENTS:

THAT I, _____, do hereby give the Isle of Wight Community Foundation and the Isle of Wight Chamber of Commerce full rights to publish my name, where I live (city, state, and country only; actual street addresses and phone numbers will not be disclosed), my pertinent family information, college I am attending, photographs that I have provided, and college update information.

I understand that by execution of this agreement, I am relinquishing my rights to any future compensation for reproduction, publication or use of the above information by the Isle of Wight Community Foundation in its print or electronic correspondence, catalog, or on its website.

I hereby specifically waive my right to review or approve THE MODIFICATION of the above Information. (Modifications may be made to accommodate size or content restrictions. Modifications will not be made to "distort" or "falsify" any information provided.)

I understand that this Agreement in no way obligates the Isle of Wight Community Foundation to publish or use the above-described information.

EXECUTED this date of _____.

By: _____
(Print Name) (Parent or Legal Guardian)

(Signature) (Signature)

Witness: _____
(Print Name)

(Signature)