Due: May 25, 2018



<u>CONGRATULATIONS! You have been nominated!</u> You have been given this application because someone believes in you and your potential. Being nominated is the first step towards becoming a REACH Scholar. The next step is to complete this application. Once completed, it will be submitted for review by a local selection committee.

REACH Georgia is a mentorship and scholarship program that provides scholars with the academic, social, and financial support needed to graduate from high school, gain access to college and achieve post-secondary success. Upon successful completion of the program, qualifying students earn a \$10,000 scholarship (\$2,500/year for up to four years) towards your educational costs at a University System of Georgia or Technical College System of Georgia institution or an eligible private postsecondary institution.

To be eligible for the REACH Georgia Program, a student must:							
		Currently be a rising 8 th grader at a participating eligible Georgia middle school (note: student begins as a REACH Scholar in the 8th grade),					
		Qualify for the Free or Reduced Lunch Program by completing the Application for Free and Reduced Price School Meals form <u>or</u> through Direct Certification. Have legal status in the United States (U.S. Citizen or legal resident),					
		Have and agree to maintain above average attendance and behavior, Have grade reports reflecting at least a 2.5 cumulative grade point average in all core courses (English,					
		mathematics, science, social studies and foreign language), Have and agree to maintain a crime and drug-free record,					
	Have the support of a parent, legal guardian, or other caring adult.						
AP	APPLICATION CHECKLIST						
		Before starting this application, make sure you meet \underline{all} of the eligibility requirements listed on the first page of the application.					
		Make sure <u>every</u> question has an answer. If any questions do not apply to your current situation, mark the question with "N/A," but <u>do not leave any question unanswered</u> . If you need more space, please feel free to attach additional pages to your application.					
		Submit one (1) completed academic reference form and one (1) community reference form to be submitted on your behalf using the forms provided with this application.					
	0	Return the entire application, with completed reference forms, to your guidance counselor by the due date indicated below.					
		ave any questions in the process, please contact Dana Hall (478) 272 - 4767.					
it yo	ou h	ave any questions in the process, please contact DUILU PIUL (118)3/3-4/6/.					
Due	e Dat	te: <u>May 25, 201</u> 8					
*RE	TURI LATE	N THIS COMPLETED APPLICATION TO YOUR SCHOOL COUNSELOR OR OTHER REACH REPRESENTATIVE AT YOUR SCHOOL R THAN THE SPECIFIED DUE DATE. INCOMPLETE OR LATE APPLICATIONS WILL NOT BE CONSIDERED					

This box to be completed by school personnel. Student GTID #
School System
Current Grade



REACH Georgia Application – Part 1 2018-2019 Academic Year

Student Information (to be completed by the student):

Legal Name:			_
first	middle		last
Scholar SS# :			
Grade (entering August 2018):			
Current Middle School:			
Anticipated High School:			
Anticipated Graduation Date (mm/dd/	year):		
Gender: ☐ Male ☐ Female			
Date of Birth (mm/dd/year):	Age:		
Phone:			
Home Address:			
City:	State: Zip Code:		
Are you under the care of the Departm	ent of Family and Children Servi	ces?	
Racial or Ethnic Group (check all that a	oply): Asian/Pacific Islander	☐ Black/African America	an
☐ American Indian/Alaskan	☐ White/Caucasian	☐ Other	

What is something that you have done that you are really proud of?
Tell us about a time that you did not achieve success? What happened? What did you learn from it?
Who do you go to if you have a problem?
Who do you look up to? Why do you admire them?
List any activities in which you are involved at school or outside of school:
List any awards or honors you have received at school or outside of school:
Do you plan on attending a postsecondary institution? ☐ Yes ☐ No ☐ Unsure
If you answered <u>yes</u> , do you have an idea what you want to study when you enroll in a postsecondary institution?
What are your hopes for your future?
How would you benefit from being a REACH Georgia Scholar?



REACH Georgia Application – Part 2 2018-2019 Academic Year

Parent/Guardian Information (to be completed by the parent or guardian):

Parent/Guardian 1 Name:								
	first	middl	e initial				last	
Relation to Student:	Phone	:			Em	nail:		
Highest Level of Education Certificate Associate's Degree Bachelor's Degree Master's Degree Professional Degree Parent/Guardian 2 Name:	Completed: (circle one):	8 th	9 th	10 th	11 th	12 th		
(if applicable)	first		middle	e initial	-			last
Relation to Student:	Phone:				Em	ail:		
Highest Level of Education of Certificate Associate's Degree Bachelor's Degree Master's Degree Professional Degree	Completed: (circle one):	8 th	9 th	10 th	11 th	12 th		
Student applicant lives with □ Mother □ Father	(check all that apply): ☐ Guardian ☐ Step	mother	□ Step	ofather	□ Oth	er:		
Is your student a U.S. Citizer Is your student an *Eligible *If you checked "Yes" for Eli > You are gen 1) a U.S. permanent 2) a conditional per 3) the holder of an Arrival-D the following designations:		r alien i Non-ci Resider ditional the Dep	registrat tizen if y at Card (Perman artment blee" (I-9	ou are o I-551) ent Resid t of Hom 94 confir	dent Ca eland S ms pard	rd (I551C) ecurity sh	ng:) lowing ar	ny one of

REACH Georgia Application 2018-2019 Academic Year Release of Information, Consent and Certifications

Consent to Photograph, Film, or Videotape a Student for Non-Profit Use

I, (Print Name of Parent/Guardian), her School System, Georgia Student Finance Authority, the Foundation affiliated w Georgia affiliates to use photographs, video images, writing, voice recordings of family in news reports, newsletters, REACH Georgia website content, program programs, articles, and/or other media outlets.	ith REACH Georgia, and other REACH		
I also grant the right to edit, use, and reuse said products for non-profit purpos Internet, and all other forms of media. I hereby release the REACH Georgia Schrinance Authority, REACH Georgia Foundation, and the agents and employees from all claims, demands, and liabilities whatsoever in contents.	olarship Program, Georgia Student School System and its		
Applicant Name:	Date:		
Applicant Signature:			
Parent/Guardian Signature:			
Certifications			
I,(Print Name of Parent/Guar provided on behalf of my student in this application and on any other documen connection with the Application is true, correct and complete to the best of our knowledge, I/my student meet(s) the eligibility requirements detailed in the application.	t or writing completed by us in knowledge. To the best of our		
l acknowledge and understand that any false or misleading information written disqualification of my student from participation in the REACH Georgia Scholars	in this application may result in the hip Program.		
Applicant Name:	Date:		
Applicant Signature:			
Parent/Guardian Signature: Date:			

FERPA RELEASE FORM

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232(g); 34 C.F.R. Part 99) is a Federal law that protects the privacy of student education records. In accordance with FERPA, it is the policy of the school system to withhold certain educational records unless the student or his or her guardian provides consent to disclose information. The purpose of this form is to provide the consent to the school system required by FERPA to allow Georgia Student Finance Authority, the REACH Georgia Foundation, Inc., colleges, universities, other REACH Georgia affiliates, and their employees, to access educational records on all REACH Scholars. (Print Name of Parent/Guardian), hereby authorize (Print Name of School) school to release and/or discuss my child's educational records including, but not limited to, attendance, discipline, grades, and home address with Georgia Student Finance Authority, the REACH Georgia Foundation, Inc., colleges, universities, and other REACH Georgia affiliates, and their employees, for the purpose of benefiting my child, the REACH Georgia Scholarship Program, the school system and any research benefitting the State of Georgia's educational programs or initiatives. Applicant GTID Number: _____ Applicant Name: Applicant Signature: ______ Date: _____ Parent/Guardian Signature: ______ Date: _____



Note to the Student Applicant:

This reference form is to be completed by a counselor, principal, teacher or other school administrator who knows you well. This person cannot be related to you. Be sure to give your reference sufficient time to complete the form before the application due date.

Complete your information below before sending this form to your reference.			
Student Applicant Name:			
School:			
Grade:			
IMPORTANT NOTE to the Student's Academic Reference: This student has been nominated to apply to participate in the Realizing Educational Achievement Can Happen (REACH) Georgia Program. REACH Georgia is a mentorship and scholarship program that begins in the 8 th grade and provides REACH Scholars with the academic, social and financial support needed to graduate from high school, gain access to college and achieve post-secondary success. Upon graduation from high school, Scholars are awarded up to \$10,000 (\$2,500 per year for up to four years) towards the cost of attendance at a Georgia HOPE-eligible public or private two or four-year college. The student applicant is asking you to provide information that will help the REACH Scholar selection committee			
identify the students who will most benefit from the REACH Georgia Program. You cannot be related to the student.			
Please provide your thoughtful and honest responses and return this form in a sealed envelope to:			
REACH Coordinator Name:			
Due Date:			



Circle the appropriate response based on your knowledge of the nominated student:

The applicant is motivated to succeed academically.

strongly agree

agree

neutral

disagree

strongly disagree

The applicant has not had difficulty adjusting academically and socially to middle school.

strongly agree

agree

neutral

disagree

strongly disagree

The applicant is involved in school activities.

strongly agree

agree

neutral

disagree

strongly disagree

The applicant is respectful of himself/herself.

strongly agree

agree

neutral

disagree

strongly disagree

The applicant cares about the well-being of others (students, teachers, etc.).

strongly agree

agree

neutral

disagree

strongly disagree

The applicant shows good follow-through and finishes tasks on time.

strongly agree

agree

neutral

disagree

strongly disagree

The applicant demonstrates drive, dedication, and determination.

strongly agree

agree

neutral

disagree

strongly disagree

1. How long have you known the student applicant? 2. How do you know the applicant? 3. What are some of the applicant's best qualities? How do you believe the opportunity to participate in the REACH Georgia Program will help the applicant 4. succeed? What are some ways the applicant may have difficulty in the program (behavior, attendance, grades, 5. consistency, interacting with adults, etc.)? What are some weaknesses/areas of potential the applicant can work on to be even more successful? 6. 7. Is there anything else you can tell us about the applicant? Reference Signature: ______ Date: _____ Printed Name: _____ Phone Number: _____Email: ____

Academic Reference Form



Community Reference Form REACH Georgia Application – Part 4 2018-2019 Academic Year

Note to the Student Applicant:

This reference form is to be completed by a person in your community who knows you well (e.g., a pastor, coach, friend or neighbor). This person cannot be related to you. Be sure to give your reference sufficient time to complete the form before the application due date.

Complete your information below before sending this form to your reference.			
Student Applicant Name:			
School:			
Grade:			
IMPORTANT NOTE to the Student's Academic Reference: This student has been nominated to apply to participate in the Realizing Educational Achievement Can Happen (REACH) Georgia Program. REACH Georgia is a mentorship and scholarship program that begins in the 8 th grade and provides REACH Scholars with the academic, social and financial support needed to graduate from high school, gain access to college and achieve post-secondary success. Upon graduation from high school, Scholars are awarded up to \$10,000 (\$2,500 per year for up to four years) towards the cost of attendance at a Georgia HOPE-eligible public or private two or four-year college.			
The student applicant is asking you to provide information that will help the REACH Scholar selection committee identify the students who will most benefit from the REACH Georgia Program. You cannot be related to the student.			
Please provide your thoughtful and honest responses and return this form in a sealed envelope to:			
REACH Coordinator Name:			
Due Date:			



Circle the appropriate response based on your knowledge of the nominated student:

The applicant is helpful and courteous to people around him/her.

strongly agree

agree

neutral

disagree

strongly disagree

The applicant is trustworthy.

strongly agree

agree

neutral

disagree

strongly disagree

The applicant is reliable and can be counted on to complete tasks.

strongly agree

agree

neutral

disagree

strongly disagree

The applicant is respectful of himself/herself.

strongly agree

agree

neutral

disagree

strongly disagree

The applicant cares about the well-being of others.

strongly agree

agree

neutral

disagree

strongly disagree

The applicant shows leadership potential.

strongly agree

agree

neutral

disagree

strongly disagree

The applicant demonstrates drive, dedication, and determination.

strongly agree

agree

neutral

disagree

strongly disagree

Community Reference Form

1.	How long have you known the student applicant?
2.	How do you know the applicant?
3.	What are some of the applicant's best qualities?
4.	How do you believe the opportunity to participate in the REACH Georgia Program will help the applicant succeed?
5.	What are some ways the applicant may have difficulty in the program (behavior, attendance, grades, consistency, interacting with adults, etc.)?
6.	What are some weaknesses/areas of potential the applicant can work on to be even more successful?
7.	Is there anything else you can tell us about the applicant?
Reference	e Signature: Date:
	ame:
	tion:
Phone Nu	mber:Email: