

**VICTOR ELEMENTARY EDUCATION FOUNDATION  
SCHOLARSHIP PROGRAM APPLICATION  
CRITERIA AND INSTRUCTIONS**

**ALL of the following criteria must be met in order to qualify for this COMPETITIVE scholarship program\*:**

1. Must complete final year and promote to junior high/middle school from Victor Elementary School District (VESD). To verify eligibility, contact the VESD Administrative Services Department.
2. Graduation requirements must be completed at a high school within the Victor Valley.
3. The applicant must have a cumulative Grade Point Average of 2.0 or better on a 4.0 scale on all high school work completed **as evidenced by transcripts**. Transcripts must include the Fall Semester of the **CURRENT** school year. (Transcripts must be from a high school within the Victor Valley, as noted in #2 above).
4. The applicant must be enrolling/applying at a **local** community college or other approved vocational school/program in the Victor Valley area. If the student does not use the scholarship, he or she will forfeit the scholarship and the next highest scoring student will receive the award.

## APPLICATION INSTRUCTIONS

You can download the application packet from [www.vesd.net](http://www.vesd.net) under “Families”. Click the link for “Victor Elementary Education Foundation”.

Please note: In order to receive maximum credit, the Applicant Information Form and personal essay should be typed. **All signatures must be handwritten.**

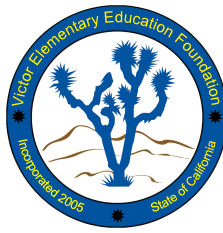
**All items listed below must be received by Monday, April 21, 2025 at 4:00 PM at:**

Victor Elementary Education Foundation  
Scholarship Program Committee  
12219 2nd Avenue  
Victorville, CA 92395

Award recipients will be announced no later than May 16, 2025 and honored at an upcoming VESD Board of Trustees meeting.

**Include the following items with your application packet:**

- A. An Applicant Information Form (preferably typed)
- B. An academic transcript including Fall Semester of current school year.
- C. Personal essay (preferably typed) of 1,000 words or less, double-spaced on a separate sheet of paper and your name on each page. Include in the essay, responses to the following three (3) topics:
  - What are your short (1 year) and long (5 year) range educational and career goals? Include a timeline on how you plan to achieve them
  - Describe your talents, accomplishments, interests, community service activities, extracurricular activities, and/or family relationships.
  - Envision the workforce in five to ten years. What skills do you think you will need to be successful in this environment and how are you preparing for it?
- D. Three local personal references (non-relatives). Include a Reference Cover Form for each letter of reference (cover forms may be handwritten or typed but must include original signatures).
  - Two references must be educators (i.e. teacher, principal, school counselor, etc.)
  - One reference must be another community leader (i.e. youth group sponsor, coach, minister, employer, etc.)



**Applicant Information Form**  
*(preferably typed)*

---

**PERSONAL INFORMATION**

LAST NAME: FIRST NAME: MIDDLE NAME

CELL PHONE: EVENING PHONE

E-mail

**PERMANENT RESIDENCE:**

Street City Zip

**MAILING ADDRESS:**

Street City Zip

Parent(s) or Guardian(s) Name(s):

**ADDRESS:**

Street City Zip Phone

School in VESD promoted from: Year

High School in Victor Valley graduating from: Year

**\* Applicant MUST ATTACH current high school transcript to this application**

Local college/vocational school in Victor Valley applying or accepted to

---

**\*This information is kept confidential and not shared.**

**Deadline: Monday, April 21, 2025 by 4:00 p.m.**

Victor Elementary Education Foundation  
Scholarship Program Committee  
12219 2nd Avenue  
Victorville, CA 92395  
Telephone: (760) 245-1691

# Applicant Information Form

## APPLICATION CONSENT

Signatures must be handwritten

**I give the Victor Elementary Education Foundation permission to publicize my scholarship award and photo should I be a recipient.**

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

Signature of Parent/  
Guardian \_\_\_\_\_

Date \_\_\_\_\_

**I give my consent for my school to release information regarding my academic records to the Victor Elementary Education Foundation Scholarship Committee. I certify that the information provided on this application is complete and accurate.**

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

Signature of Parent/  
Guardian \_\_\_\_\_

Date \_\_\_\_\_

**Deadline: Monday, April 21, 2025 by 4:00 p.m.**

Victor Elementary Education Foundation  
Scholarship Program Committee  
12219 2nd Avenue  
Victorville, CA 92395  
Telephone: (760) 245-1691

*Award Recipients will be announced no later than May 16, 2025 and honored at an upcoming VESD Board of Trustees meeting*

---

# Applicant Information Form

*(preferably typed)*

I. List all Leadership Activities (i.e. club leader, sports captain, etc.)

Activity \_\_\_\_\_ Year(s)

---

II. List all Community Service Activities (volunteer work, etc.)

Activity \_\_\_\_\_ Year(s)

**Deadline: Monday, April 21, 2025 by 4:00 p.m.**

Victor Elementary Education Foundation  
Scholarship Program Committee  
12219 2nd Avenue  
Victorville, CA 92395  
Telephone: (760) 245-1691

## Personal Essay

*Input your essay in the text field below.  
(You may opt to submit it in an alternate format).*

---

**VICTOR ELEMENTARY EDUCATION FOUNDATION  
SCHOLARSHIP PROGRAM  
REFERENCE COVER FORM**

*Signatures must be handwritten*

APPLICANT NAME: \_\_\_\_\_

INTENDED COLLEGE/TRADE SCHOOL: \_\_\_\_\_

I waive the right to review information provided by the evaluator: yes \_\_\_\_\_ no \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_

---

**TO THE REFERENCE:**

This student is applying for a scholarship award to be given by the Victor Elementary Education Foundation. The information you provide will be most helpful to the scholarship committee. Since students have the right to determine whether or not they wish to have access to this evaluation, you should note the action they have taken.

**DESCRIPTION AND EVALUATION OF APPLICANT**

Please evaluate the applicant on the characteristics that you have observed in 300 words or less. Please address self-discipline, perseverance, initiative, integrity, consideration of others, creativity and academic promise. Your comments are valuable and appreciated.

Please state your relationship to the APPLICANT:  
(i.e. teacher, coach, minister, business person) \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

Your Name \_\_\_\_\_ Signature \_\_\_\_\_

Title \_\_\_\_\_ Phone \_\_\_\_\_

**DEADLINE: Monday, April 21, 2025 by 4:00 pm**

Victor Elementary Education Foundation  
Scholarship Program Committee  
12219 2<sup>nd</sup> Avenue  
Victorville, CA 92395  
Telephone: (760) 245-1691

**VICTOR ELEMENTARY EDUCATION FOUNDATION  
SCHOLARSHIP PROGRAM  
REFERENCE COVER FORM**

*Signatures must be handwritten*

APPLICANT NAME: \_\_\_\_\_

INTENDED COLLEGE/TRADE SCHOOL: \_\_\_\_\_

I waive the right to review information provided by the evaluator: yes \_\_\_\_\_ no \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_

---

**TO THE REFERENCE:**

This student is applying for a scholarship award to be given by the Victor Elementary Education Foundation. The information you provide will be most helpful to the scholarship committee. Since students have the right to determine whether or not they wish to have access to this evaluation, you should note the action they have taken.

**DESCRIPTION AND EVALUATION OF APPLICANT**

Please evaluate the applicant on the characteristics that you have observed in 300 words or less. Please address self-discipline, perseverance, initiative, integrity, consideration of others, creativity and academic promise. Your comments are valuable and appreciated.

Please state your relationship to the APPLICANT:  
(i.e. teacher, coach, minister, business person) \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

Your Name \_\_\_\_\_ Signature \_\_\_\_\_

Title \_\_\_\_\_ Phone \_\_\_\_\_

**DEADLINE: Monday, April 21, 2025 by 4:00 pm**

Victor Elementary Education Foundation  
Scholarship Program Committee  
12219 2<sup>nd</sup> Avenue  
Victorville, CA 92395  
Telephone: (760) 245-1691



**VICTOR ELEMENTARY EDUCATION FOUNDATION  
SCHOLARSHIP PROGRAM  
REFERENCE COVER FORM**

*Signatures must be handwritten*

APPLICANT NAME: \_\_\_\_\_

INTENDED COLLEGE/TRADE SCHOOL: \_\_\_\_\_

I waive the right to review information provided by the evaluator: yes \_\_\_\_\_ no \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_

---

**TO THE REFERENCE:**

This student is applying for a scholarship award to be given by the Victor Elementary Education Foundation. The information you provide will be most helpful to the scholarship committee. Since students have the right to determine whether or not they wish to have access to this evaluation, you should note the action they have taken.

**DESCRIPTION AND EVALUATION OF APPLICANT**

Please evaluate the applicant on the characteristics that you have observed in 300 words or less. Please address self-discipline, perseverance, initiative, integrity, consideration of others, creativity and academic promise. Your comments are valuable and appreciated.

Please state your relationship to the APPLICANT:  
(i.e. teacher, coach, minister, business person) \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

Your Name \_\_\_\_\_ Signature \_\_\_\_\_

Title \_\_\_\_\_ Phone \_\_\_\_\_

**DEADLINE: Monday, April 21, 2025 by 4:00 pm**

Victor Elementary Education Foundation  
Scholarship Program Committee  
12219 2<sup>nd</sup> Avenue  
Victorville, CA 92395  
Telephone: (760) 245-1691