



**QUEENSBURY COMMUNITY SCHOLARSHIP
ASSOCIATION, INC. (QCSA)
2022 SCHOLARSHIP APPLICATION**

The mission of this Queensbury-based scholarship program is to award as many scholarships as possible to graduates who are seeking to continue their education. These scholarships will be awarded on the basis of several criteria, including but not limited to, community spirit, school activities, financial need and academic achievement.

Important Information: Applicants are responsible for seeing that all information requested herein is submitted and accurate. The Awards Committee will not process applications found to be incomplete or submitted after the deadline.

Application Deadline: Applications are due by **3:30 p.m. on Friday, April 1, 2022** at the Queensbury High School Counseling Center. Please submit your completed application in one of three ways: 1) In-Person; 2) Scan/Email to Mrs. Nelson, Secretary (knelson@queensburyschool.org); or, US Mail.

Applicant: _____
Name (last) (first) (middle initial)

Permanent Address (street) (city) (state) (zip)

_____ () _____
Date of Birth (month/day/year) Telephone

_____ Name of parent(s)/ guardian(s)

Post-Secondary School Plans: Please list the name and location of the college, university or other educational institution you plan to attend. If yet to be determined, please list your top three choices in order of preference. You will need to advise the Counseling Center, and in *Naviance*, of your final decision as soon as it is determined.

***Special Scholarship Consideration: * Please check all that apply. ***

*Do you plan on attending SUNY Adirondack this fall: ____ Yes ____ No

*Do you plan on studying a STEM-related degree program this fall: ____ Yes ____ No

I plan to enroll in a College/University: ____ Less than half-time ____ Half-time or more ____ Full-time

I plan to enroll in a Trade/Technical School: ____ Less than half-time ____ Half-time or more ____ Full-time

Are you eligible for free/reduced lunch at QHS: ____ Yes ____ No ____ Unsure

It is highly recommended that you attach your updated Resumé. If you have submitted a Resumé to the Counseling Center, please request that it be added to your application.

Have you ever volunteered for the QCSA Phone-A-Thon/Mail-A-Thon? Yes ___ No ___
(If you answered Yes, what grade(s) were you a volunteer? Please check Grade(s): 9__ 10__ 11__ 12__)

This section only needs to be completed if the student applicant does NOT want their photo/image to be utilized in Queensbury Community Scholarship Association publications:

*The QCSA is honored and enthused to showcase Queensbury student photographs for use in various **Queensbury Community Scholarship Association (QCSA)** publications, public affairs announcements, scholarship materials, or other QCSA social media endeavors such as through the QCSA Website, or within the QCSA Facebook Page. However, we also recognize that occasionally students and/or parents may object to the release of photographs, and wish not to have photos used for such purposes. Therefore, if you do not want your photo used by the QCSA, please sign this "Out-Opt Statement" below. The absence of a signature, in essence, grants the QCSA organization permission to use student photographs for the sole purposes as described above.*

Student Signature	Date Signed
Signature of Parent or Guardian (If student is under 18 years of age)	Date Signed

***In submitting this application, I certify that the information provided herein is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.**

Applicant's Signature _____
Date

To be completed by the School Counselor

To the best of your knowledge does the information provided in this application appear to be accurate?

Yes: _____ No: _____ Not Sure: _____

If you feel the Awards Committee should be made aware of any additional information or special circumstances, please provide your comments in the following space:

Attachments: Transcript; Resumé; and, Counselor Letter (if applicable).

School Counselor Signature: _____ Date: _____

******Deadline: Friday, April 1, 2022 at 3:30 p.m.******

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