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**Scholarships ranging from \$250 - \$1,000 is available to graduating seniors from the following: Manteca, Ripon & Tracy Unified School Districts. Recipients are announced at each school awards night.**

## **Scholarship Application**

### *Eligibility Requirements*

- Scholarship is open to all Give Every Child A Chance (GECAC) volunteers (active within the past 4 years of high school) graduating this year. Volunteer service does not have to be served within the tutoring component of our program.
- Must have contributed at least 100 hours (non-school) of community service within the past four years of high school. (Not all hours need to be served at Give Every Child A Chance). Letters of proof are required from the organization(s) that you completed the community service.
- No minimum grade point average is required.
- Only one scholarship entry per student. Entries must be typed and signed.
- All attached forms must be completed in order to qualify for scholarship.

### **Deadline for applications is April 1st of each year.**

*If April 1st falls on a weekend, the due date is the following Monday.*

*No late applications will be accepted!*

#### ***Return completed applications to:***

Give Every Child A Chance  
Attn: Samantha Worthington  
322 Sun West Place, Manteca, CA  
Manteca, CA 95337

**Please contact Samantha Worthington at [sworthington@gecac.net](mailto:sworthington@gecac.net) with any questions or to email an application.**

**Applications are also available at [www.gecac.net](http://www.gecac.net)**

# Basic Information

(Applications must be typed and submitted with all attachments)

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First Name MI Last Name

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Mailing Address City State Zip

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Email School Name of Counselor

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College Choice Major/Course of Study

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Social Security Number Date of Birth Phone: Day/Evening/Cell

I hereby certify that the information I have submitted as correct. I will provide additional information upon request. If granted the scholarship, I agree to the publication of my name and picture by GECAC; I understand that scholarship recipients must request and expend all scholarship funds within 2 years from date of announcing the scholarship or risk the forfeit of the award.

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Signature of Applicant

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Signature of Parent/Guardian (if under 18 years of age) Printed Name

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Date





3. List and describe your participation in **school related activities**. **List names and phone numbers or email to verify activities.** *(You may attach additional pages if needed)*

Approximate Number of Hours: \_\_\_\_\_

4. **Clearly** explain how this scholarship will assist you in achieving your educational and career goals? **This is your chance to convince the judges that you would be the right choice for this scholarship.**

*(You may attach additional pages if needed)*

