



## **PARKSIDE ECONOMIC DEVELOPMENT CORPORATION**

**EMPOWERING YOUTH | DEVELOPING RESOURCES | CHANGING LIVES**

Thank you for your participation in the **Parkside Economic Development Corporation's** 2019 Scholarship Program. Our scholarships are available to college-bound students who need supplementary funds towards their college education. We're attaching our scholarship application packet for you to give to the students in your school/organization.

Generally, we seek to assist students who have special financial needs due to family circumstances or whose GPA is in the median range, but they are highly motivated to attend college. However, our scholarships are open to all students.

The application deadline is February 22, 2019 - **No exceptions**. The application must be completed with all reference letters, information pages and **original school transcript attached**. Applications can be mailed to Parkside EDC or collected by our established contacts. **Late applications will not be considered.**

**Applicant Zip Code Catchment areas: 90008, 90016, 90018, 90019, 90036, 90037, 90043, 90044, 90045, 90047, 90048, 90056, 90062, 90301, 90302, 90303**

Our timeline for completing the review process is as follows:

- ✓ Deadline for receipt of applications - Friday February 22, 2019
- ✓ Review of all applications completed by March 1, 2019
- ✓ **REQUIRED FINANCIAL LITERACY WORKSHOP** - March 9, 2019 8 am - 10 am
- ✓ Selection of final candidates - March 11, 2019
- ✓ Face-to-Face interviews - March 16, 2019
- ✓ Final selection of scholarship recipients - March 18, 2019
- ✓ Award Breakfast scheduled for April 27, 2019

Questions or contact information:

- Parkside EDC- 4323 Leimert Blvd., Los Angeles, CA 90008 (mail applications)
- Shirley Worrels (Scholarship co-chair) (213) 364-8803
- Charles Moorehead (Scholarship co-chair) (213) 247-7465
- Patricia Jackson-Kelley (Scholarship co-chair) (323) 752-6252

**PARKSIDE ECONOMIC DEVELOPMENT CORPORATION  
SCHOLARSHIP APPLICATION- 2019**

**This application must be submitted to Parkside EDC  
no later than February 22, 2019  
(Official transcript required)**

**Student's Name:** \_\_\_\_\_ **AGE:** \_\_\_\_\_

**School Name:** \_\_\_\_\_ **Weighted GPA:** \_\_\_\_\_

**Student's Home Address:** \_\_\_\_\_

**Student's Home #:** \_\_\_\_\_ **Cell:** \_\_\_\_\_ **ok to text?** \_\_\_\_\_

**Email (required)** \_\_\_\_\_ **@** \_\_\_\_\_ **.COM**

**Have you been accepted in college? YES** \_\_\_\_\_ **NO** \_\_\_\_\_ **If yes, name of school (s)**

**1.** \_\_\_\_\_ **2.** \_\_\_\_\_ **3.** \_\_\_\_\_

**4.** \_\_\_\_\_ **5.** \_\_\_\_\_ **6.** \_\_\_\_\_

**Which school is your #1 choice?** \_\_\_\_\_

**Name of parent(s) or guardian:**

\_\_\_\_\_ **relation** \_\_\_\_\_ **employed: yes** \_\_\_\_\_ **no** \_\_\_\_\_

\_\_\_\_\_ **relation** \_\_\_\_\_ **employed: yes** \_\_\_\_\_ **no** \_\_\_\_\_

**Have you applied for other scholarships? Yes** \_\_\_ **No** \_\_\_ **If yes, have you received any** \_\_\_\_\_

**How many siblings and their ages:**

**# brothers:** \_\_\_\_\_ **ages** \_\_\_\_\_

**# sisters:** \_\_\_\_\_ **ages** \_\_\_\_\_

**How many siblings have attended college** \_\_\_\_\_ **How many currently in college?** \_\_\_\_\_

**Contact information: (cell)** \_\_\_\_\_ **E-mail** \_\_\_\_\_ **@** \_\_\_\_\_

**Answer these questions on a separate sheet.**

**MUST be typed, handwritten responses not accepted.**

- 1). In what school organizations have you participated?**
  
- 2). How have you contributed to your school, church and/or community?**
  
- 3). Work Experience**
  
- 4). Home Responsibilities**
  
- 5). How do you plan to pay for your college education?**
  
- 6). What are your career goals? How many years of education are required to achieve these goals?**
  
- 7). What are your educational goals? (bachelors, masters, doctorate, etc)**
  
- 8). What are the three most important things you want Parkside EDC to know about you?**
  
- 9). If you are selected to receive a scholarship will you commit to staying in touch with the board? How will you do this?**

**Student, this section MUST be completed by two or more of your teachers and/or school counselors.**

Assessor, please rate each category on a scale of 1 to 5 (5 highest) and provide a brief explanation to justify your rating.

Student's Name: \_\_\_\_\_

Assessor's Name/Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email \_\_\_\_\_

**1). Scholastic Achievement: 1 2 3 4 5**

Comments \_\_\_\_\_

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**2). Handles Responsibilities Well: 1 2 3 4 5**

Comments \_\_\_\_\_

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**3). Scholarship Award Worthiness: 1 2 3 4 5**

Comments \_\_\_\_\_

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**4). Other Comments:**

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