

THE COMMUNITY FOUNDATION OF BURKE

COUNTY

THE KEITH WARREN BLACK EDUCATIONAL SCHOLARSHIP

DESCRIPTION

The Keith Warren Black Educational Scholarship was established in June of 2014 by Lynn M. Black to honor the life of Keith Warren Black and his dedication to education. This scholarship will provide financial assistance to students at Western Piedmont Community College (WPCC).

Keith Black graduated from Parsons College, located in Fairfield, Iowa. He graduated from Parsons College with a degree in Education, earned his Masters in Special Education at the University of Northern Iowa and pursued further graduate work at the University of Iowa.

Mr. Black and his wife Lynn raised their family in Cedar Rapids, Iowa, where he principally worked as a consultant for the Grant Wood Area Education Agency, serving children with special needs. He also served as the Coordinator of the East Central District Iowa Special Olympics for fourteen years and facilitated special programming at Kirkwood Community College. He was an active member of the First Lutheran Church teaching Sunday School and serving on their Board of Directors. He additionally served on the Board of Directors for the YMCA Camp Wapsie and Arc.

He was a dedicated, devoted and engaged educator who had a deep belief in providing an opportunity for all to obtain a higher education.

ELIGIBILITY

The scholarship is available to students entering or already attending WPCC. It is available to all majors. This scholarship will be awarded without regard to race, creed, sex, ethnic background, or handicap.

The student must be enrolled full-time and maintain satisfactory academic progress. A past Keith Warren Black Scholarship recipient may submit an application for renewal, if the recipient has maintained a minimum cumulative 2.5, within the 4.0 grading system

CRITERIA

- 1st. GPA of 2.5
- 2nd. Enrolled full-time and maintain satisfactory academic progress
- 3rd. Determined to have financial need as evidenced by completion of the FAFSA
- 4th. Demonstrated community involvement and extracurricular activity
- 5th. Proven history of work experience
- 6th. Preference will be given to members of, or students whose parents or grandparents are or were members of Calvary Lutheran Church, located at 119 North King Street, Morganton.

SELECTION PROCESS

The Scholarship Committee of Calvary Lutheran Church shall serve as the selection committee. This Committee may submit one nominee for this scholarship to the Community Foundation of Burke County by April 1st. The Scholarship Committee of the Community Foundation of Burke County will review all nominees and make its recommendation to the Board of Directors. The Board of Directors of the Community Foundation of Burke County shall give final approval to the nominee who is awarded.

Please submit completed application to Calvary Lutheran Church by April 1st

THE COMMUNITY FOUNDATION OF BURKE COUNTY

PAYMENT OF AWARDS

Payment of scholarship awards will be made directly to WPCC, in accordance with financial policies established by the Board of Directors of the Community Foundation of Burke County.

The scholarship recipient must provide the Community Foundation of Burke County with an official transcript from WPCC at the end of each semester for which a scholarship is received.

Please submit completed application to Calvary Lutheran Church by April 1st

THE COMMUNITY FOUNDATION OF BURKE COUNTY

APPLICATION PROCESS

1. Complete the application form.
2. Attach a transcript.
3. Attach a copy of your FAFSA.
4. Attach up to 3 Letters of Recommendation.
5. Attach a typed, one page essay in which you address the following:
 - The reason you want to get a college education.
 - The difference receiving a scholarship would mean in your life.
 - Significant experiences, community involvement, and the qualities of character and leadership important to achieving your goals.
 - Any financial circumstances you would like the scholarship committee to consider when reviewing your application.
6. By April 1st mail Items #1- 5 to:
The Keith Warren Black Educational Scholarship Committee
C/O Calvary Lutheran Church
119 North King Street
Morganton, NC 28655

Please submit completed application to Calvary Lutheran Church by April 1st

THE COMMUNITY FOUNDATION OF BURKE COUNTY
THE KEITH WARREN BLACK EDUCATIONAL SCHOLARSHIP APPLICATION

Please read each entire section before completing the application.

APPLICANT INFORMATION

Name: _____
Last
First
Middle
“Goes By”

Permanent Address: _____

Email: _____ Telephone: _____

Date of Birth: _____ Place of Birth (City/State or Country): _____

High School: _____
School Name
School Phone Number

Please include a transcript with your application.

FAMILY INFORMATION

(List first, the parent/guardian you live with most, if you are still living with your parents or a guardian)

Parent/Guardian 1: _____
First Name
Last Name
Work Phone #

Occupation: _____ Employer: _____

Parent/Guardian 2: _____
First Name
Last Name
Work Phone #

Occupation: _____ Employer: _____

Household: (check one) Single Parent: _____ Two Parent: _____ Living Independently: _____

Number of People Living In Household: _____

Check if Applicable: () Father Deceased () Mother Deceased () Parents Separated () Parents Divorced

Please include a completed copy of FAFSA or W-2 from previous with your application.

Parent Education Levels:

- Mother a) High School Graduate: Yes ___ No ___ b) Four-year College Graduate: Yes ___ No ___
- Father a) High School Graduate: Yes ___ No ___ b) Four-year College Graduate: Yes ___ No ___

List names and ages of brothers & sisters living at home or in college who are dependents of parent (s) or guardian (s):

Name: _____ Age: _____ College: _____

Name: _____ Age: _____ College: _____

Name: _____ Age: _____ College: _____

Name: _____ Age: _____ College: _____

NAME _____

EXTRACURRICULAR ACTIVITIES

In the space provided below or on a separate page, please list extracurricular activities in which you have participated during the past four years of high school. If currently attending college or graduate school, attach a list of the extracurricular activities that you have been involved in since entering college. Include clubs, sports, student government, fine arts, etc.

ACTIVITY					College	APPROX. TIME OUTSIDE CLASS HRS/WK WKS/ YR	LEADERSHIP POSITIONS, LETTERS EARNED, AWARDS, RECOGNITION, ETC.
	9 th	10 th	11 th	12 th			

COMMUNITY & VOLUNTEER ACTIVITIES

In the space provided below or on a separate page, list community, church/synagogue and personal activities in which you have participated during the past four years of high school. If currently attending Western Piedmont Community College, attach a list of the community, church/synagogue and personal activities in which you have participated since entering college. Include volunteer work, youth programs, athletic programs, music, dance, scouting, 4-H, or hobbies to which you have devoted time.

ACTIVITY					College	APPROX. TIME OUTSIDE CLASS HRS/WK WKS/ YR	LEADERSHIP POSITIONS, LETTERS EARNED, AWARDS, RECOGNITION, ETC.
	9 th	10 th	11 th	12 th			

NAME _____

WORK EXPERIENCE

In the space provided below or on a separate page, please list any work experience (including self-employment) you have had during the past four years. Include summer jobs as well as employment during the school year. Complete this information beginning with your most recent work experience.

EMPLOYER – Contact Person & Phone	Position	Dates Employed	Hours/Week

COLLEGE INFORMATION (FOR THOSE PLANNING TO ATTEND COLLEGE FOR THE FIRST TIME)

What major(s) would you like to pursue? _____

COLLEGE INFORMATION (FOR THOSE CURRENTLY ENROLLED IN COLLEGE)

What major are you pursuing? _____

ESSAY

Attach a one page essay describing the reason you want to get a college education, the difference receiving a scholarship would mean in your life, significant experiences, community involvement, qualities of character and leadership that are important in achieving your goals and any financial circumstances you would like the Scholarship Committee to consider when reviewing your application.

RECOMMENDATIONS

Please make copies of the attached form and submit no more than three (3) recommendations from a teacher or school official, a club or community sponsor/advisor or any non-family member. All recommendations should be on the attached form and returned to the scholarship committee in a sealed envelope with signature across the seal.

OTHER AWARDS

Please list below or on a separate page the name, amount and status of any grants or scholarships for which you have applied for the coming school year.

NAME OF AWARD	AMOUNT	GRANTED	PENDING

Please notify the Community Foundation of Burke County office of any grants or scholarships you receive after you submit this application.

CERTIFICATION

In voluntarily submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted. I give my permission to this Scholarship Selection Committee, the Community Foundation of Burke County Scholarship Committee, the Directors of the Community Foundation of Burke County and the Community Foundation of Burke County staff to release information contained in this application for the purposes of determining and publicizing scholarship awards.

Applicant's Signature _____ Date _____

- **Before submitting this application, please make a copy for your records.**
- **Insert all attachments inside the application and clearly indicate your name on the top right corner of all attachments.**
- **Do not use staples, since applications must be copied.**

Please return a completed application to The Keith Warren Black Educational Scholarship Committee; c/o Calvary Lutheran Church, 119 North King Street, Morganton, NC 28655 by April 1st.

For more information, contact:

The Community Foundation of Burke County ~ Telephone: (828) 437-7105 ~ E-mail: nwtaylor@cfburkecounty.org

