

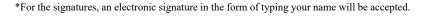


RED SOX SCHOLARS PROGRAM **2021 APPLICATION**

BACKGROUND

The Red Sox Scholars is a college success program that awards a \$10,000 college scholarship to 12 Boston Public School 7th graders each year. The Foundation then provides academic, professional, and social support to students for at least the next nine years to ensure they graduate from college with as little debt as possible and prepared to enter the workforce - as well as feeling part of a family of resources for years to come.

| ELIGIBILITY | |
|--|--|
| □ Legally enrolled as a full-time 7th grade student in Charter School for School Year 2020-21. □ Demonstrate strong academic potential. □ Demonstrate strong financial need. | in the Boston Public School District or at a Boston Public |
| Completed applications must be submitted to RedSoxSo | cholars@redsox.com by Friday, April 2, 2021. |
| TERMS OF AWARD | |
| required to sign a <i>Terms and Conditions Agreement</i> , which Access to scholarship funds is contingent upon the Scholar program, display of good citizenship, and adherence to the | |
| By signing below, you acknowledge you have read and u | inderstand the above Terms of Award: |
| Applicant Signature: | Date: |
| Applicant Name (print): | |
| Parent/Guardian Signature | Date |





Parent/Guardian Name (print):















1. PERSONAL INFORMATION

| First Name: | ne: Last Name: MI: | | MI: |
|---|------------------------|--|-------------|
| Date of Birth:/ | _ Place of Birth: _ | Gender: | |
| Which of the following categories Hispanic or Latino White (Not Hispanic or Asian American Indian or Ala Black or African American | Latino) Iska Native | Decline to self-identity | ul) |
| Are you a U.S. Citizen? Yes | □ No (This que. | stion is optional and the information is entirely conf | fidential.) |
| Street Address: | | Apt #: | |
| City: | State: | Zip: | |
| Home Phone: | Cell Phone: | | |
| Email: | | | |
| | | | |
| 2. PARENT/GUARDIAN INFO | RMATION | | |
| Parent/Guardian 1: | | | |
| First Name: | I | Last Name: | |
| Relation to Applicant: | | | |
| Cell Phone: | Email: | | |
| Employment Status: | | | |
| Job Title & Employer: | | | |
| Highest Level of Education Comp | leted: | | |
| Parent/Guardian 2: | | | |
| First Name: | I | Last Name: | |
| | | | |
| Cell Phone: | | | |

















| Employment Status: | | | | |
|--|---|---------------|--|--|
| Job Title & Employer: _ | | | | |
| Highest Level of Educa | tion Completed: | | | |
| Who do you live with? | ☐ Both Parent/Guardians ☐ One Pare | ent/Guardian | | |
| Who else lives at home | with you? | | | |
| Emergency Contact: | | | | |
| First Name: | Last Name | : | | |
| Relation to Applicant: _ | | | | |
| Cell Phone: | Email: | | | |
| 3. FINANCIAL & HOUSEHOLD INFORMATION Note: Please have your parent/guardian complete this section. If you are selected as a finalist, a copy of your parent/guardian(s) 's most recent tax return will be required. 2020 Annual Household Income: Please list your household income according to your parent/guardian(s) tax return(s). Income Sources (select all that apply): Wages Unemployment Benefit Self-Employment Income Veterans Benefit Transitional Assistance for Needy Families (TANF) Social Security (SS) Supplemental Security Income Alimony/Child Support Other: Is there anything else that you'd like us to know about your family's financial situation? | | | | |
| Housing Type: | | | | |
| How many household n | nembers are under the age of 18? | | | |
| How many household n | nembers will be in college next school ye | ar (2021-22)? | | |















| School Name: | | | BPS | ID Number*: | |
|--|--------------|--|---------------|------------------------|---------------------------|
| Guidance Counselor | Name: | | | | n Public School District. |
| Guidance Counselor | Phone: | En | nail: | | |
| | | rent academic grades in the space al Transcript will be required. | e below, as w | vell as your grades in | 6th grade. If you are |
| Course Example: Math | 7th Gra | de – Current Course Grade | 6th Gi | rade – Final Course | Grade |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 5. EXTRA-CURRIC | CULAR AC | TIVITIES INFORMATION | | | |
| Please describe your | extra-curric | ular activities and awards or reco | ognition you' | ve received in the spa | ice below. |
| Please describe your Activity or Award | extra-curric | ular activities and awards or reco | ognition you' | received in the spa | To (mm/yyyy) |
| | extra-curric | | ognition you' | _ | |
| | extra-curric | | ognition you' | _ | |
| | extra-curric | | ognition you' | _ | |
| | extra-curric | | ognition you' | _ | |
| | extra-curric | | ognition you' | _ | |
| | extra-curric | | ognition you' | _ | |

















6. ESSAYS

This application requires submission of two essays. Each essay must answer the prompt in no more than 500 words and should be typed in the spaces outlined below. If you've written your essays in another document, you may copy and paste them into the spaces outlined below.

| Essay #1: Please answer the following prompt in no more than 500 words using the space below. | | | |
|---|--|--|--|
| ☐ "All About Me" – What is one thing that you learned about yourself in the past year? What caused you to | | | |
| feel this way? | | | |
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| Essay | #2: Please choose one of the three prompts to answer in no more than 500 words using the space below. |
|-------|---|
| | "Whom I Admire" – Think about a person in your life whom you admire. What is this person like? Why do you admire them? |
| | "My Perfect Day" – Describe your perfect day. If you had an entire day to do anything, what would it be and why? |
| | "What's in Your Backpack?" – Imagine you are traveling to a country that you have never been to before. Your backpack includes three items that will help the local population learn about you and your family. What are those three items and how do they represent your background? |
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7. APPLICANT'S STATEMENT

All information in each section of this application is accurate, written by me (except for Section 3. Financial & Household Information), and complete to the best of my knowledge. I understand that I may be asked to provide written proof to verify the accuracy of any or all information presented in this application, including information pertaining to financial need and academic grades. I agree to adhere to all terms, conditions, and expectations of the Red Sox Scholars Program should I be selected as a 2021 Red Sox Scholar, and understand my complete application must be received by the Foundation by Friday, April 2, 2020 in order to be considered.

| ☐ I have read and agree to the Applicant's Statement above, and I agree to be bound by all the Terms and Condition of the Red Sox Scholars Program should I be selected as a recipient. | | |
|---|-------|--|
| Applicant Signature: | Date: | |
| Applicant Name (print): | | |
| Parent/Guardian Signature: | Date: | |
| Parent/Guardian Name (print): | | |
| | | |

8. SUBMITTING YOUR APPLICATION & NEXT STEPS

Completed applications must be submitted to RedSoxScholars@redsox.com by Friday, April 2, 2021.

Our selection committee looks forward to reading your application!

The Scholar Selection Committee will review all eligible applications, giving careful consideration to all aspects of the application. The 20 application finalists will be invited to an interview with the Committee, who will then select 12 students to become 2021 Red Sox Scholars.

> **April 17, 2021** Fifty (50) semi-finalists receive virtual interview invitation May 8, 2021 Twenty (20) finalists receive virtual interview invitation May 15, 2021 Finalist Interview Day via Zoom The twelve (12) 2020 Scholars receive their acceptance letter May 28, 2021



Red Sox Foundation | 4 Jersey Street, Boston MA 02215 RedSoxFoundation.org | **y** @RedSoxFund | **f** Red Sox Foundation













