



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

ELIGIBILITY	
 □ Legally enrolled as a full-time 7th grade student in the Boston Charter School for School Year 2020-21. □ Demonstrate strong academic potential. □ Demonstrate strong financial need. 	n Public School District or at a Boston Public
Completed applications must be submitted to RedSoxScholars@red	dsox.com by Friday, March 26, 2021.
TERMS OF AWARD	
All decisions made by the Scholarship Selection Committee are final. A required to sign a <i>Terms and Conditions Agreement</i> , which details the reduces to scholarship funds is contingent upon the Scholar's enrollment program, display of good citizenship, and adherence to the requirements Failure to comply with the <i>Agreement</i> may result in partial or full loss of Program. Scholarship funds are only paid directly to the school, never a Scholarship, I grant my school and/or district permission to share relevation.	equirements for the Red Sox Scholars Program. t in an accredited college, university or vocational s set forth in the <i>Terms and Conditions Agreement</i> . of scholarship eligibility and/or dismissal from the a private individual. By applying for the
By signing below, you acknowledge you have read and understand to	the above Terms of Award:
Applicant Signature:	Date:
Applicant Name (print):	
Parent/Guardian Signature:	Date:

*For the signatures, an electronic signature in the form of typing your name will be accepted.



Parent/Guardian Name (print):















1. PERSONAL INFORMATION

First Name:	Last Name:		MI:
Date of Birth:/ Pl	lace of Birth:	Gender:	
Which of the following categories best Hispanic or Latino White (Not Hispanic or Latin Asian American Indian or Alaska N Black or African American	no)	Hawaiian or Other Pacific Islander	onal)
Are you a U.S. Citizen?	No (This question is option	al and the information is entirely co	onfidential.)
Street Address:	Apt #:	·	
City:	State: Zip:		
Home Phone: (Cell Phone:		
Email:			
Please list any languages spoken (other			
2. PARENT/GUARDIAN INFORMA	TION		
Parent/Guardian 1:			
First Name:	Last Name:		
Relation to Applicant:			
Cell Phone:			
Employment Status:			
Job Title & Employer:			
Highest Level of Education Completed:	:		
Parent/Guardian 2:			
First Name:	Last Name:		
Relation to Applicant:			
Cell Phone:			

















Employment Status:	
Job Title & Employer:	
Highest Level of Education 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. It parent/guardian(s)'s most recent tax return will be required. 2020 Annual Household Income: Please list your household income according to your parent/guardincome Sources (select all that apply): Wages Self-Employment Income Transitional Assistance for Needy Families (TANF) Social Security (SS) Supplemental Security Income Other:	\$
Housing Type: ☐ Rent ☐ Own ☐ Other: Number of Household Members: How many household members are under the age of 18?	
How many household members will be in college next school ye	ear (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?				

















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?













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, March 26, 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 Conditio 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):			

Completed applications must be submitted to RedSoxScholars@redsox.com by Friday, March 26, 2021.

Our selection committee looks forward to reading your application!

8. SUBMITTING YOUR APPLICATION & NEXT STEPS

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

May 28, 2021 The twelve (12) 2020 Scholars receive their acceptance letter



Red Sox Foundation | 4 Jersey Street, Boston MA 02215

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