Applicant's Name:

LAST NAME FIRST NAME

MIDDLE INITIAL

2018 Scholarship Application, College Student

MUST BE EMAILED NO LATER THAN MONDAY, MAY 7, 2018

Graphic Communications Scholarship, Award and Career Advancement Foundation, Inc. ("Foundation")

CRITERIA Use this form	m if you are:			
	A student entering or continuing a college course(s) in Graphic Communications/ Arts who has not before received a Foundation scholarship			
	with a demonstrated interest in Graphic Communications/Graphic Arts and a plan to graduate with a major in or are majoring in a discipline leading to a career in the field,			
	a permanent United States resident of one of the five boroughs of New York City OR the New York State counties of Nassau, Suffolk, Westchester or Rockland OR the New Jersey State counties of Bergen, Essex, Hudson or Union (your "permanent" address").			
ALL OF THE FOLLOWING MATERIALS ARE REQUIRED FOR CONSIDERATION. PLEASE SUBMIT VIA EMAIL TO scholarships@gcsfny.org :				
	A PDF file of this completed scholarship application.			
	A scanned copy of your Official Notice of Acceptance into a two or four year college with a Graphic Communications curriculum.			
	An official copy of your High School transcript showing your grades and grade average, e-mailed directly from your High School.			
	A scanned copy of your most recent SAT or ACT scores.			
	An official copy e-mailed directly from your school of your current college transcript showing your grades and grade point average.			
	Scanned proof of your continued enrollment for the upcoming semester in a two or four year college with a Graphic Communications curriculum anywhere in the country (United States).			
	Three letters of support and recommendation, e-mailed directly from the recommending person(s) , as an attachment or in the body of the e-mail: Two from (subject related) faculty members or instructors; One from your former principal, current faculty advisor, teacher or community leader.			
	The above three recommending persons' / writers' contact information including school/ company, e-mail address and phone number, typed in a separate additional MS Word doc or e-mail .			
	Your typed, one-page double-spaced statement (300 to 500 words) discussing your particular interest in Graphic Communications/ Arts and why you should be considered for a scholarship. This statement is extremely important. MS Word doc please.			
	A portfolio in your area of expertise e.g., design and production, illustration, layout, photography, video, web design, typography, etc. i.e. demonstrating range and development of graphic skills, different types of work/ mixed media, i.e. posters, digitally altered / formatted photos, drawings, paper creations, packaging, business card design, book design/ layout/ creation, web site design (include web address and jpeg pages from the website). Please provide a minimum of five (5) pieces of your art / design work; showing your			
	range of talent and style(s). Only medium res pdfs, jpegs and short videos will be accepted. You can send jpegs and pdfs via e-mail or larger files via ftp (file transfer via web) and an address for such will be provided if requested and necessary for your submission of the portfolio. All submitted documents and work becomes the property of the Foundation and will not be returned. By submitting your artwork, original or copy, you agree to permit the Foundation to use your artwork or any other submitted material for the Foundation's promotional purposes in print or on the web, for commercial and non commercial purposes related to the business of the Foundation, and your signature on this application additionally authorizes your release and permission.			
	Your current resume in either MS Word or a PDF file			

APPLICANT DATA I am a citizen or legal resident of the United States (insert x) _ Yes _ No _ Male _ Female							
TYPE ABOVE LINES							
LAST NAME		FIRST NAME	MIDDLE INITIAL				
PERMANENT / HOME ADDRES	SS		APARTMENT				
SCHOOL / MAILING ADDRESS	5 (If Different)		APARTMENT				
CITY	STATE		ZIP				
HOME TELEPHONE	CELL PHONE # and CARRIE	R COMPANY i.e. Verizo	n EMAIL (PERSONAL)				
EMAIL (SCHOOL)	TWITTER ACCOU	UNT NAME	SKYPE NAME/OTHER CONTACT				
SOCIAL SECURITY NUMBER		DATE OF BIRTH: MONTH / DAY / YEAR					
PARENT OR GUARDIA	AN INFORMATION						
LAST NAME		FIRST NAME	MIDDLE INITIAL				
HOME ADDRESS			APARTMENT				
CITY	STATE		ZIP				
RELATIONSHIP TO APPLICAN	T DAYTIME TELEPHONE	CELL PHONE # / CARF	RIER E-MAIL ADDRESS (WK & HM)				
ARE YOU CURRENTLY RECEIV	/ING EDUCATIONAL AND/ OR	HOUSING / LIVING E	XPENSE FINANCIAL SUPPORT				
FROM YOUR PARENT(S) OR O	GUARDIAN? _ YES _	_ NO					
HIGH SCHOOL DATA							
SCHOOL NAME							
ADDRESS							
CITY	STATE		ZIP				
CONTACT (SCHOOL OFFICIAL	-, TEACHER, COUNSELOR)	TELEPHONE	E-MAIL ADDRESS				
HS GRADE POINT AVERAGE	JPON GRADUATING	SAT OR ACT SCOR	RE(S)				
Annlicant's Name							

SCHOOL HONORS AND SPECIAL RECOGNITION

CURRENT COLLEGE GRADE POINT AVERAGE (GPA) IS:
HIGH SCHOOL AND COLLDGE ACTIVITIES CLUBS, GROUPS, TEAMS, COMMUNITY SERVICE, ETC. – INCLUDE DATES AND OFFICES HELD
OTHER FUNDING SCHOLARSHIPS, GRANTS, ETC. (Amount of each, Giver or Provider of each, Are any renewable?)
EMPLOYMENT HISTORY Include employer, phone number, contact name and e-mail address, dates, hours per week, position, responsibilities (attach your resume)
Applicant's Name

SCHOLARSHIP SCHOOL DATA

NAME OF SCHOOL YOU ARE ATTENDING NOW AND IN THE FALL (Attach copy of your Official Notification of Acceptance)						
ADDRESS	_					
CITY	STATE		ZIP			
CONTACT NAME	TELEPHONE	E-MAIL ADDR	ESS			
_ 4 YEAR COLLEGE OR UNIVE	RSITY _ 2 YEAR COMMUNITY	OR JUNIOR COLLEGE	_ TECHNICAL SCHOOL			
YOUR MAJOR OR COURSE OF S	TUDY					
FALL SEMESTER - I WILL BE A:	_ FRESHMAN _ SOPH _	JUNIOR _ SENIOR	$_$ 1 ST YR GRAD STUDENT			
EXPECTED GRADUATION DATE:	MONTH: YEAR:					
DEGREE SOUGHT: _ BACHELO	OR _ ASSOCIATE	_ CERTIFICATE	_ OTHER			
STUDENT WILL: _ LIVE ON	CAMPUS _ LIVE OFF CAMPUS	_ COMMUTE FROM	HOME			
STUDENT FINANCIAL STATUS I	S/ WILL BE:					
_ DEPENDENT OF PARENT(S	S) OR GUARDIAN _ INDEPENDI	ENT STUDENT STATUS	(SCHOOL TO CONFIRM)			
WHERE DID YOU LEARN ABOUT	THE SCHOLARSHIP?					
WHERE DID YOU GET THIS FOR	M?					
APPLICANT'S DIGITAL/ TYPED A	AND HAND WRITTEN SIGNATURE		DATE			
PARENT OR GUARDIAN'S SIGNA	ATURE (Applicable if student is depe	endent)	DATE			

PRINT THIS LAST PAGE AND APPLICANT AND PARENT / GUARDIAN (IF STUDENT IS DEPENDENT) IS/ARE TO SIGN (SCRIPT HAND SIGNATURE) NEXT TO THE DIGITAL SIGNAURE/ TYPED NAME, THEN SCAN THE FULLY SIGNED PAGE AND INCLUDE IN THE APPLICATION SUBMISSION AS A SEPARATE ADDITIONAL PAGE.

Email the completed and signed Application PDF and all Required Application Materials to:

Jerry Mandelbaum GC Scholarship Foundation scholarships@gcsfny.org For more information: Call: 212-400-2449 Fax: 646-390-7063

Email: info@GCScholarships.org

Or visit our website: www.GCScholarships.org

Submitted Applications and support materials can be submitted at the same time **which is preferable, in a zipped file**, or separately if necessary i.e. recommendation letter coming directly from the writer of the recommendation.

Applicant's Name