

# 2024 YAB Scholarship Award

**Sponsored by:**

**Town of Wethersfield  
Youth Advisory Board  
(YAB)**



Congratulations on your quest for college! We want to help you reach your goal. One of the goals of the Town of Wethersfield's Youth Advisory Board is to instill community service in students that will remain with them for a lifetime. To that end, The Youth Advisory Board (YAB) is offering a \$1,000 scholarship to any current Wethersfield senior in high school to use towards college expenses.

Below are the criteria:

- 1) Complete YAB application including a Transcript from High School.
- 2) Has proven community service of eighty (80) hours or more accrued during time of high school, twenty (20) hours of which must come from senior year.
- 3) A cumulative grade point average of 3.0 throughout high school.
- 4) The scholarship award must be used for the academic year beginning in the fall of 2024
- 5) A written essay of 500 words and/or an oral video essay describing why you deserve the scholarship award submitted in advance of the interview.
- 6) A personal interview with the YAB committee.

## **Details of Award:**

The Youth Advisory Board is a thirteen-member council appointed board comprised of Wethersfield citizens and town representatives (Board of Education, Wethersfield Police Department, Social and Youth Services, and Town Council). The Board's purpose is to gather information from youth and adults in town to form youth policies and to develop youth programs in response to town needs. It also serves to advocate for youth issues and disseminate relevant information to the appropriate audiences who have interests or involvement in drug, alcohol and tobacco prevention efforts.

There will be one winner of the YAB Scholarship Award. The winner is awarded \$1,000 towards college expenses. College can include a community college, four year college, and technical or vocational school.

The deadline for submission is Friday, March 8<sup>th</sup>. 2024. Interviews will take place the week of March 18<sup>th</sup>

The Youth Advisory Board will review all submissions, ensuring compliance with the above criteria and collectively make a decision on the winning recipient. The award recipient will be notified in writing and a courtesy phone call at the number provided on the application.

## APPLICATION FOR THE YAB SCHOLARSHIP

Student First Name		Last Name
Student Street Address		Town/Zip
Date of Birth:		Phone Number
<input type="checkbox"/> Wethersfield High School Senior		<input type="checkbox"/> Other:* <i>(List name of school)</i>
<input type="checkbox"/> Written Essay	<input type="checkbox"/> Oral Video Essay	Email
Cumulative GPA (9-12) _____		Indicate college you are planning to attend in the Fall, 2024.
Anticipated major:		

**COMMUNITY SERVICE** Indicate the number of community service hours you have fulfilled along with the location, details of service and name and contact information of a supervisor. *Eighty (80) hours are required from 9-12<sup>th</sup> grade, and twenty 20 hours of the eighty must be completed during senior year.*

1) No. of hours \_\_\_\_\_ Location \_\_\_\_\_

Address \_\_\_\_\_ . Town \_\_\_\_\_ State \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Phone: \_\_\_\_\_

2) No. of hours \_\_\_\_\_ Location \_\_\_\_\_

Address \_\_\_\_\_ . Town \_\_\_\_\_ State \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Phone: \_\_\_\_\_

3) No. of hours \_\_\_\_\_ Location \_\_\_\_\_

Address \_\_\_\_\_ . Town \_\_\_\_\_ State \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Phone: \_\_\_\_\_

4) No. of hours \_\_\_\_\_ Location \_\_\_\_\_

Address \_\_\_\_\_ . Town \_\_\_\_\_ State \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Use separate page to add additional community service hours and contact information.

Please indicate your availability for an interview.

Monday, March 18th       Wednesday, March 20th

Chose the best time you would be able to interview.

6:15 p.m.       6:45 p.m.       7:15 p.m.       7:45 p.m.

List any other awards, or honors you received during your time in high school that you wish to share.

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

4) \_\_\_\_\_

5) \_\_\_\_\_

Comments:

**SUBMITTING YOUR APPLICATION**

The deadline is Friday March 8<sup>th</sup>.

Submit application and essay to Wethersfield Social and Youth Services, 505 Silas Deane Highway, Wethersfield, CT. 06109 to the attention of Patrick Telman, Youth Development Manager. Submissions can be dropped off or sent by postal mail. For questions, you may contact 860-721-2781.

The award recipient will be notified in writing and a courtesy phone call at the number provided on this application. Any submissions received after March 8, 2024 will not be considered for the scholarship award.

Signature of Student	Signature of Parent/ Guardian
Date of Application:	*Proof of Residency Required for any student not attending Wethersfield High School.  <i>Page 2/YAB Scholarship Award/2024</i>

*Sponsored by the Town of Wethersfield Youth Advisory Board*