

Lylton L. and Augusta Inettie B. Edwards Vocational Trade Scholarship Application

Scholarship Release Date: February 1, 2013

Purpose:

Mrs. Augusta Inettie B. Edwards a long-time resident of Newport News, Virginia and retired school teacher for the Newport News Public schools, established a scholarship endowment fund in the name of she and her husband, the Lylton L. and Augusta Inettie B. Edwards Endowed Scholarship Fund.

The scholarship fund was established to assist residents of the <u>Southeast community of Newport News</u>, Virginia with pursuing <u>vocational trade education</u>. Mrs. Edwards is passionate about providing the opportunity to assist community residents to receive the education and training for a vocational trade.

Applications are due April 12, 2013.

Applications received will be reviewed by the Scholarship committee. Recommended applicants for the scholarship will be submitted to the Board of Trustees for the C. Waldo Scott Center, during the May 14, 2013 Board meeting for approval.

The recipient will be presented to the Board for recognition and award of the scholarship on June 11, 2013. Only a certificate of award will be presented at this time; the monetary award will be sent to the respective institution upon confirmation of attendance.

Document is also available on the Scott Center's website: www.scottcenter.org



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Please TYPE/PRINT information requested on this form.

Part A- General Information

Last Name	First Name		 1iddle Initial	
Date of Birth: Month				
Social Security Number:				
Address:# Street		City	Zip Code	
Mailing address if different:				
Phone #:				
Education history:				
High school graduate Year Year		Obtained G.E.D.	Year	
Last grade level completed:				
Vocational schools to which you h	ave applied:			
Name of vocational school you pla	an to attend:			
Have you been accepted for admi	ssion to the vocational so	hool of your choice	? Yes No	
*Please provide a copy of letter of	acceptance from vocation	nal school or other	official documentation from	
vocational school to verify your er	rollment. Documents att	ached: Yes 🗌 N	o 🗌 To be mailed 🗌	

Part B- Residency Information			
Are you a U.S. citizen? Yes No No			
Are you a resident of the Commonwealth of Virginia? Yes \(\scale= \) No \(\scale= \)			
How many years have you lived at your current address?			
Are you able to provide proof of residency? Yes No No *Proof of residency must be a document, bill, school records, etc. which verifies your address.			
If under 18 years old: Name of parent or guardian:			
Address of parent/guardian:			
Phone number of parent/guardian (area code) + number			
Part C- References: Please provide two (2) letters of reference/recommendation from persons (community residents, church members, co-workers, school personnel, supervisors, etc., but can not include relatives) to speak to your character, motivation to accomplish your goals, etc.			
Part D- Certification			
I certify that the information I have provided above is true and accurate:			
Signature of Applicant Date			
Mail application and supporting documentation to: C. Waldo Scott Center for H.O.P.E. Attn: Scholarship Committee 3100 Wickham Avenue Newport News, VA 23607 (757) 244-9223			