



**Georgia Compensatory Educational Leaders, Inc.**  
**Scholarship Application 2019**

The Georgia Compensatory Educational Leaders (GCEL), Inc. Scholarship is designed for high school seniors who will attend an institution of higher education in the Fall of 2019. GCEL will award five (5) scholarships valued at \$2,000 per student. Scholarship application must be postmarked by November 15, 2018. Late or incomplete applications will not be reviewed. For additional information, please visit [www.gcel.org](http://www.gcel.org).

**SCHOLARSHIP REVIEW GUIDELINES**

**1. Applicant must provide the following information in order to demonstrate eligibility for the GCEL Scholarship:**

- Submit verification of enrollment as a senior in a Georgia Title I School for the 2018-2019 school year from a school official,
- Submit official high school transcript in a sealed envelope showing a grade point average of 2.5 or higher,
- Submit one letter of recommendation from a school official,
- Submit verification of SAT or ACT scores,
- Submit an essay between 250 to 500 words stating future goals,
- Submit completed GCEL, Inc. scholarship package and
- Submit proof of acceptance of enrollment to a college, university, or technical school no later than September 30, 2019

**2. Submit completed scholarship application package with all applicable signatures to:**

Dr. Jannie Gregory  
 Attn: Scholarship Committee  
 Post Office Box 5402  
 Columbus, Georgia 31906

*The scholarship winners will be announced at the GCEL, Inc. Conference on Wednesday, February 13, 2019 and will be posted after the conference at [www.gcel.org](http://www.gcel.org).*

**PRIVACY ACT STATEMENT**

The information required will only be used for the purpose of this scholarship and no other.

Privacy Act of 1974

**APPLICANT INFORMATION: Please print clearly or type the following information.**

1.	Last Name: <input type="text"/> First Name: <input type="text"/> Middle Name: <input type="text"/>
2.	Permanent Residence: Address: <input type="text"/> City: <input type="text"/> State: <input type="text"/> Zip: <input type="text"/>
3.	Daytime Telephone Number: <input type="text"/> Alternate Telephone Number: <input type="text"/> Email Address: <input type="text"/>
4.	Date of Birth: Month <input type="text"/> Day <input type="text"/> Year <input type="text"/>
5.	Gender: (Check one) Male <input type="checkbox"/> Female <input type="checkbox"/>
6.	High School: <input type="text"/> Address: <input type="text"/> City: <input type="text"/> State: <input type="text"/> Zip: <input type="text"/>
7.	<b>Add numbers as needed on an attached sheet of paper or a resume to answer A, B, and C of this question.</b> A. List high school membership activities, academic honors, and awards. 1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/>

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	<p>B. List non-school sponsored community volunteer activities and awards:</p> <p>1. <input type="text"/></p> <p>2. <input type="text"/></p> <p>3. <input type="text"/></p> <p>C. List extracurricular activities, school related volunteer activities, other interest and hobbies:</p> <p>1. <input type="text"/></p> <p>2. <input type="text"/></p> <p>3. <input type="text"/></p>
8.	<p>A. List name and location of university, college or technical college you plan to attend.</p> <p>Name: <input type="text"/></p> <p>Location: <input type="text"/></p> <p><i>(Scholarship award will be mailed <u>directly</u> to the recipient's college account. Verification of enrollment must be provided.)</i></p>
9.	<p><b>Indicate course of study?</b></p> <p><input type="text"/></p>
10.	<p><b>What are your career goals?</b></p> <p><input type="text"/></p>
11.	<p><b>Write an essay (250 - 500 words) stating applicant's future goals on a separate sheet of paper. Essay must include the following:</b></p> <ul style="list-style-type: none"><li>• Describe how volunteer or community service has shaped who you are today,</li><li>• What community service has taught you,</li><li>• Discuss any challenge(s) or obstacle(s) you have encountered and overcome in life, and</li><li>• How this challenge or obstacle will help you succeed in college and beyond.</li></ul>

<b>PARENT(S)/GUARDIAN(S) INFORMATION</b>	
12.	Name(s) of Parent(s) or Guardian(s): <input type="text"/> Address: <input type="text"/> City: <input type="text"/> State: <input type="text"/> Zip: <input type="text"/> Home telephone number of parent(s) or guardian(s): <input type="text"/> Work phone: <input type="text"/> Email: <input type="text"/>

I certify the information provided is true to the best of my knowledge and grant permission for the information contained to be shared with the scholarship selection committee.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>SCHOLARSHIP COMMITTEE USE ONLY:</b>		
Date application received: _____		
Verification of enrollment as a senior: <input type="checkbox"/>		
Reviewed by:		


Remarks:
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