



The Jenny Winebarger Memorial Scholarship

Child Advocates of Iredell and Alexander Counties annually awards up to three \$1,000 scholarships including the Jenny Winebarger Memorial Scholarship to deserving youth who are in or have been in the foster care system of District 22a. Eligible students are or will be attending an accredited trade or vocational school, community college or four-year university within 12 months. This scholarship is for the current year, but the applicants may apply again in subsequent years. Scholarship monies will be paid directly to the educational institution.

ELIGIBILITY:

1. Applicants must be attending or planning to attend a full-time or part-time program at an accredited university, community college, or trade/vocational institution this calendar year.
2. Applicants must have been in foster or kinship placement in Iredell or Alexander counties.
3. Applicants must be aged 25 years or less at the time of application.
4. Applications are accepted on a rolling basis, there is not an application deadline. Applications will be purged December 31st of each calendar year and students are invited to apply each calendar year they are eligible.

APPLICATION REQUIREMENTS:

1. Complete the attached application form
2. Attach one letter of recommendation from someone other than a relative. Some possible choices include DSS workers, Guardian ad Litem, employers, teachers, and school counselors.
3. A copy of your most recent report card including cumulative GPA
4. A personal statement of at least 500 words discussing why you feel you should receive this scholarship and your goals for the future.
5. In the event a scholarship is awarded, the completion of a release allowing limited use of your name, and likeness is requested to allow CAIAC to promote awareness of CAIAC, its activities, programs, and fundraising.

SUBMISSION OF APPLICATION:

The completed application along with recommendation letter, personal statement, and report card should be emailed to caiac.charity@gmail.com or send to CAIAC, PO Box 1324, Mooresville, NC 28115.

Name of Applicant: _____

Email: _____ Telephone: _____

Current Address: _____

Current High School: _____

Graduation Date: _____ GPA: _____ (attach copy of your transcript)

List extracurricular activities or sports during high school: _____

List any employment history including company name and dates employed: _____

Community Activities or Honors received: _____

College, University or Vocational School you will attend/are attending:

Major/Program of study: _____ Anticipated completion date: _____

I, _____ (printed name) pledge that the information contained in this application is true and accurate to the best of my ability. I understand that false statements will disqualify me from receiving this award. I understand that the purpose of this award is to support costs related to achieving my education including tuition, books, meal plans, etc.

Applicant Signature: _____

SIGNATURE OF LEGAL GUARDIAN REQUIRED IF APPLICANT IS UNDER THE AGE OF 18

Legal Guardian Printed Name: _____

Legal Guardian Signature: _____ DATE: _____

Requested Limited Personal Release Agreement

Grant

For consideration which I acknowledge, I grant to Child Advocates of Iredell and Alexander Counties (“Company”) and Company’s assigns, licensees, and successors, the right to use my image for the following purposes: marketing, fundraising, and increasing general awareness of the Company worldwide without limitation for a period of two years from the execution of this release.

I grant the right to use my name and image for the purposes listed above in all forms and media, including composite or modified representations, and waive the right to inspect or approve versions of my image used for publication or the written copy that may be used in connection with the images.

Release

I release Company and Company’s assigns, licensees, and successors from any claims that may arise regarding the use of my image including any claims of defamation, invasion of privacy, or infringement of moral rights, rights of publicity, or copyright. Company is permitted, although not obligated, to include my name as a credit in connection with the image.

Printed Name: _____

Date: _____

Signature: _____

Address: _____

Witness Signature: _____

Parent/Legal Guardian Consent REQUIRED if the person is under 18

I am the parent or legal guardian of the minor named above. I have the legal right to consent to and do consent to the terms and conditions of this release.

Printed Parent/Guardian Name: _____

Date: _____

Parent/Guardian Signature: _____

Parent/Guardian Address: _____

Witness Signature: _____