



# ***WESTLEY KE'SHUN JOHNSON, JR.***

## ***CHAMPIONS FOUNDATION INCENTIVE SCHOLARSHIP***

### **DEADLINE: APRIL 30th**

The Westley Ke'Shun Johnson, Jr. Champions Foundation Incentive Scholarship is a one-time award of \$500 to selected individuals who are dedicated in making a difference within the special needs community.

### **ELIGIBILITY REQUIREMENTS**

The following criteria must be met in order for an application to be given consideration for an incentive scholarship:

- Applicant must be a high school senior applying to, or a college student currently attending, a trade school, an accredited college, university, medical or graduate school within the United States or an active certified Special Education Instructor.
- Applicant must currently participate in an inclusion program for Special Needs students and/or be a sibling or relative of an individual with special needs.
- Applicant must maintain a GPA of 2.5 or higher or meet the equivalence requirements for the program in which the applicant is enrolled or be a certified special education instructor.

### **SELECTION CRITERIA**

The following criteria will be used to select the award recipient:

- Extent to which applicant meets all eligibility criteria and submits all application materials prior to the stated deadline
- Extent to which applicant has demonstrated a commitment to inclusion of special needs students in school programs and within the community
- Quality of applicant's essay as described in the incentive scholarship application
- Quality of letters of recommendation

### **MAIL COMPLETED APPLICATIONS TO:**

Westley Ke'Shun Johnson, Jr. Champions Foundation  
P.O. Box 158  
Schertz, TX 78154

**APPLICATION MUST BE RECEIVED NO LATER THAN APRIL 30TH**



**WESTLEY KE'SHUN JOHNSON, JR.**  
**CHAMPIONS FOUNDATION INCENTIVE SCHOLARSHIP APPLICATION**

Legal name in full \_\_\_\_\_  
(Print/Type) Last Name First Name M.I.

Permanent residence \_\_\_\_\_  
Number, Street, and Apartment Number

\_\_\_\_\_ City State ZIP

Your address at school \_\_\_\_\_  
(if different) Number, Street, and Apartment Number

\_\_\_\_\_ City State ZIP

How is permanent residence established? Home telephone ( ) \_\_\_\_\_  
(At least two must apply.)

Home address for school registration Cell telephone ( ) \_\_\_\_\_  
(if different)

Place of registration to vote E-mail address \_\_\_\_\_

Family's primary residence

Other: \_\_\_\_\_ Date of birth \_\_\_\_\_ Age \_\_\_\_\_  
Month/Day/Year

(Check one) I am a  U.S. citizen  Resident alien expecting citizenship by the date of award

(Check one)  Student  Sibling/Relative  Certified Special Education Instructor  Parent/Guardian  Other \_\_\_\_\_

Current cumulative GPA \_\_\_\_\_ on a scale \_\_\_\_\_ Anticipated Graduation Date \_\_\_\_\_

**PLEASE SUBMIT THE FOLLOWING WITH YOUR APPLICATION**

- A current transcript of grades (this may be a copy and does not need to be in an official sealed envelope) or letter from school official to verify current certification as a Special Education Instructor
- Any proof of acceptance you have received from an accredited college, university or trade school within the U.S. (proof of enrollment must be submitted before incentive scholarships are awarded to recipient)
- Two letters of recommendation from faculty/staff at the high school or college you currently attend (academic recommendation), community leader (community involvement recommendation), or guardian/relative (personal recommendation)
- A two-page typed essay that includes the following:
  1. Tell us about yourself, your interest, public service, and community involvement activities.
  2. Explain how involvement in an Alternative Learning Environment inclusion program with special needs students has impacted your academic/personal life experiences and/or share a personal life experience as it relates to being a sibling or relative of an individual with special needs.
  3. Tell us about your career goals.

**I DECLARE THAT ALL OF THE STATEMENTS IN THIS APPLICATION ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND AUTHORIZE THE WESTLEY KE'SHUN JOHNSON, JR. CHAMPIONS FOUNDATION COMMITTEE TO VERIFY ANY STATEMENTS IN DETERMINING MY ELIGIBILITY FOR INCENTIVE SCHOLARSHIP AWARD APPROVAL. I UNDERSTAND THAT IF I AM AWARDED AN INCENTIVE SCHOLARSHIP, I MUST PROVIDE PROOF OF ACCEPTANCE TO AN ACCREDITED COLLEGE, UNIVERSITY, MEDICAL OR GRADUATE SCHOOL WITHIN THE UNITED STATES.**

**APPLICANT'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_