Fresh Start Scholarship Foundation, Inc.
P.O. Box 7784 | Wilmington, DE 19803
302.397.3440 | FSSF@freshstartscholarship.org

Fresh Start Scholarship Academic Year 2021 -2022

**DEADLINE:** Completed application must be submitted by **May 15, 2021**

Late applications will not be accepted for consideration.
All applicants will be notified by mail on or before July 31, 2021

**What we do:** Provide financial incentive through a **renewable annual scholarship and mentoring** to a woman returning to college to improve her life and opportunities.

**Eligibility:**
Candidates must:

- Be female.
- Be a U.S. citizen or Permanent Resident.
- Be a resident of Delaware OR be currently employed in Delaware for at least the past 12 months.
- Be at least 20 years of age and have a high school diploma or G.E.D.
- Submit an official college transcript that shows at minimum a 2.0 average GPA if currently enrolled in college or if you have attended college in the past.
  *NOTE:* If NOT currently enrolled in college you will need to submit an *official copy* of your transcript from past college attendance (if applicable), from high school or your *official copy* of your GED program to be considered.
- Have had at least a two year break in education either after completing high school or during post-secondary (college) studies.
  *NOTE:* Students who have previously earned a bachelor’s degree are not eligible to apply.
- Be admitted to an accredited Delaware college in a two or four year degree program at the undergraduate level.
  *NOTE:* You will be asked to confirm acceptance into designated college.
- Submit one (1) letter of recommendation from a college representative, a nonprofit/government agency or an employer.
  *NOTE:* Letter must be on official letterhead or use provided Recommendation Form.
- Identify two (2) persons (NON-family members) to be called as a reference.
  *NOTE:* All financial information needs to be filled out to be eligible for review. *Any incomplete applications will not be considered.*
- Submit a completed application including financial data, a personal statement and letter of recommendation.
  *NOTE:* You may submit your application and letter of recommendation separately. However, it is your responsibility to follow up and ensure all parts of your application are received. *Any incomplete applications will not be considered.*
- Be available for a brief telephone interview if selected as a scholarship finalist.
- If approved as a Fresh Start Scholar award winner, you must attend (1) scholar orientation session in August/September.

**Award:** The number and amount of the awards will be determined annually prior to the fall semester but will in no event exceed the costs of tuition, fees, books and other direct educational expenses. Awards will be paid directly to the college prior to the beginning of each semester.

Applications are evaluated on the information supplied; therefore, answer all questions as completely as possible. **Incomplete application will not be considered.** Awards are granted without regard to race, marital status, age, religion, sexual orientation, or national origin.

The **Fresh Start Scholarship Foundation, Inc.** is a 501 (c)(3) organization.
302-397-3440 | FSSF@FreshStartScholarship.org
Applications must be filled out completely. Any incomplete applications will not be considered. If a section does not apply, please fill in “N/A” so we know your application is complete. Do not leave any section blank.

PERSONAL DATA

Name: ________________________________________________

Address: ________________________________________________

Phone: ___________ Email Address: (please list an email that you check regularly) ___________________________

Birthdate: ___________ Last 4-digits of your SSN: ____________________________

Marital Status: (please check one)
Married_______ Single_______ Separated_______ Divorced_______ Widowed_______

Number and ages of Dependents _______________________________________

The above information will be used to contact you throughout the year with time sensitive information. Please print clearly and provide current contact information.

EDUCATION DATA

Name of College or University you are attending or plan to attend during the 2021 – 2022 academic year:

_______________________________________________

Campus _____________________________________________

Degree Expected: Bachelors___________ Associates___________

Major ______________________________________________

Year in school: Freshman_____ Sophomore_____ Junior_____ Senior _____

Number of credits you will have earned/completed by the end of May 2021 ______________

Number of Semesters or Credits remaining BEFORE graduation? Semesters___________ Credits______________

Anticipated graduation date: Month: _________ Year: __________

Cumulative GPA: ______ as of: ___/____ (insert month and year)

(You must attach or mail OFFICIAL TRANSCRIPT by application deadline to be considered a completed application)

ESTIMATED ANNUAL COSTS

How many credit hours do you plan to take per semester? ________________

Upcoming Fall Semester: tuition $ ______________ fees $ ___________ books $ ______________

Upcoming Spring Semester: tuition $ ______________ fees $ ___________ books $ ______________
Have you applied for or been awarded other scholarships or grants (including the Pell Grant) for the upcoming academic year? (All applicants are encouraged to apply for Financial Aid from their institution.)

<table>
<thead>
<tr>
<th>Name of Award</th>
<th>Amount</th>
<th>Check One</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$_______</td>
<td>Granted _____ Pending _____</td>
</tr>
<tr>
<td></td>
<td>$_______</td>
<td>Granted _____ Pending _____</td>
</tr>
</tbody>
</table>

*Please list any additional awards on separate page.

**WORK EXPERIENCE**

Describe your work experience for the past two years (if homemaker, please indicate). Indicate dates of employment for each job and approximate number of hours worked each week. List amounts earned at each job.

<table>
<thead>
<tr>
<th>Employer/Position</th>
<th>From-Mo/Yr</th>
<th>To-Mo/Yr</th>
<th>Hours/wk.</th>
<th>Hourly wage</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**PERSONAL STATMENT**

Please submit an essay that answers the following questions (**maximum length two pages**): Please note that your personal statement is an important factor in the selection process.

- How have you spent your time since you were last in school on a full time basis?
- What barriers or challenges have you faced in trying to continue your education?
- What do you plan to do with the higher education that you are seeking?
- How will it improve your life and opportunities for yourself and your family, if appropriate?
To be considered for an award, the section below must be filled out completely. Any incomplete application will not be considered. If a section does not apply, please fill in “N/A” so we know your application is complete. Do not leave any section blank. You may submit tax forms and any other documents you feel would assist us in determining your financial need but they are NOT REQUIRED.

All tax information will be for preceding year.

Check here if you will not file and are not required to file a current U.S. Income Tax Return. _________

TOTAL Annual Income of Applicant $___________
TOTAL Annual Income of Spouse $___________
(Total Income earned should be reported individually for both the applicant and applicant’s spouse, if married.)

Adjusted Gross Income (FORM 1040 Line 7) $___________
(Adjusted Gross Income can be found on IRS FORM 1040 (line 7) and is gross income reduced by specific adjustments as allowed by law. Include adjusted gross income for spouse, if married.)

Total Federal Tax Paid (FORM 1040 Line 18) $___________
(Total Federal Tax Paid includes the amount of federal income tax to be paid as reported on IRS FORM 1040 (line 18). This is not the amount withheld from employee paychecks. The amount paid should be adjusted by any refund or additional taxes paid. Do not include state taxes.)

Yearly Untaxed Income and Benefits (Please check all that apply)
(Untaxed Income and Benefits include any other income or benefits of applicant and applicant’s spouse, if married, not included in the adjusted gross income figure. Do not include untaxed contributions to retirement plans.)

_____Child Support $___________
_____Social Security $___________
_____Other - Please specify __________________________ $___________

Rent $___________ per month OR Mortgage Payment $___________ per month
(Housing Costs include monthly rent or mortgage payments less any amount paid through Section 8 funding.)

Total Cash, Checking, Savings, Cash Value of Stocks, etc. $___________
(Total Cash, Checking, Savings, Cash Value of Stocks, etc. includes liquid assets that can be used for educational purposes. Not included are IRA, 401K, or other retirement plans.)
Number of people in your household, #_________

include:
• yourself and your spouse if you have one
• your children, if you will provide more than half of their support from July through June
• other people if they now live with you and you provide more than half of their support and will continue to
  provide more than half of their support.

REFERENCES

Your references can NOT be family members. Please inform the references listed below that someone from the
Fresh Start Scholarship Foundation will be calling them in the month of June, so they are prepared to receive our
call. Please list current and accurate information.

1. Name of Reference: ___________________________ Relationship to applicant: ___________________________

   Phone: _________________________________ Email: _______________________________________________________________________

2. Name of Reference: ___________________________ Relationship to applicant: ___________________________

   Phone: _________________________________ Email: _______________________________________________________________________

CONSENT

I, the undersigned applicant, hereby agree that, should I be awarded the Fresh Start Scholarship, The Fresh Start
Scholarship Foundation, Inc. may use my name and picture in a press release and related publicity announcing the
award. It is understood that the press release may include the qualifications required for the award and disclosure
of the social service agency and/or college representative that endorsed the candidate’s application, in addition to
some biographical information from the applicant’s application. I certify that the essay is my personal work and
creation and I agree to provide proof of information I have given on this form, including a copy of my U.S. Income
Tax form, if requested. Falsification of information may result in termination of any scholarship granted.

Applicant’s Name (printed) ___________________________

Applicant’s Signature Required ___________________________ Date ___________________________

*Must sign document to be considered a completed application*
Applications do not have to be submitted in full. However, YOU are responsible for obtaining all required documents and submitting them to Fresh Start Scholarship Foundation by the deadline of May 15th annually.

**Do you have all of your documents?**

All of the following materials must be submitted by the deadline of May 15th:

FSSF, PO Box 7784 | Wilmington, DE 19803
OR
Email to FSSF@freshstartscholarship.org

- Completed application including ALL financial data, personal statement and signed consent
- Personal Statement (using area provided or a document attached separately)
- One (1) Letter of Recommendation from a Social Service Agency or College/Employer Representative
- Two (2) Persons listed as references
- Official copy of high school transcript or GED certificate OR, if applicable, copy of Official college transcripts

**Incomplete Applications will not be considered.**

If you have questions concerning the 2021-2022 application please call 302-397-3440