ANDERSON VALLEY EDUCATION FOUNDATION P.O. Box 242 Boonville, Ca. 95415

Second Chance Scholarship Application for Anderson Valley Graduates

Birth Date:
Zip Code:
Home Phone:
Year of HS Graduation:
tional school after high school? Yes No
Starting Date:
Career goal:
ional pages as necessary):
ation:
ı have participated in:

High School Verification

Please attach an official copy of your college (if attending) or high school transcript.

Essay

Please attach a typed essay, of 750 words or less, that tells the committee about you, and what you have been doing since high school graduation. Please also respond to one of the two following prompts:

-If you are currently enrolled in college tell us about your experiences and what financial obstacles you face.

OR

-If you delayed your college experience tell us why you are now interested in post high school education.

References

Please attach at least one letter of recommendation from a high school or college instructor, the principal, a counselor or recent employer.

Student Signature:	Date:	
Parent/guardian Signature:	Date:	
(Required only if you are under 18 years of age.)		

Mail completed application, including transcripts, essays and references to:

Anderson Valley Education Foundation P.O. Box 242 Boonville, CA 95415