

# 2017 “FIRST IN FAMILY” GRADUATE INFORMATION PACKET

### \*\*EXCLUSIVELY FOR CCISD GRADUATING SENIORS WHO WILL BE THE FIRST IN THEIR FAMILIES TO EARN A HIGH SCHOOL DIPLOMA THIS YEAR, MAY-JUNE 2016\*\*

Dear 2017 “First in Family” Graduating Senior,

CONGRATULATIONS on the occasion of your upcoming graduation, and in particular for the coming achievement of being the very first person in your immediate family to earn a high school diploma. We join your family members and our community in honoring you and the legacy you have established in your household and among our school district. Because this is such a significant achievement, the Corpus Christi Independent School District and the Corpus Christi Education Foundation are hosting a special graduate recognition ceremony for only First in Family graduates from each high school.

To receive an invitation, be included in list of exclusive “First in Family” graduates, receive commemorative items, and be honored among the community this year for your achievement, **you must complete and submit this information packet to your high school counselor’s office no later than Friday, March 10, 2017.** *Scholarship awards will be presented at the event, as well as a gold “First in Family” medal to be worn with your cap and gown on graduation day when you walk across the stage. But you must complete the attached Graduate Application and plan to attend the event.*

Review the list of important items below:

* You must complete and submit the “**2017 First in Family Graduate APPLICATION**”

(first two pages) in its entirety to be included as a “First in Family” graduate and receive all items mentioned above.

* You must complete and submit the “**2017 First in Family Graduate APPLICATION**”, “**2017 CITGO First in Family SCHOLARHIP APPLICATION**” (all pages), and submit all documentation requested in that application, to be considered for a $1,000 scholarship (multiple awards will be presented at the First in Family graduate ceremony). This is an EXCELLENT scholarship opportunity for those planning to attend college or trade school in Fall 2017.
* **You must receive an invitation for you and your family** to attend the First in Family Graduate Ceremony on Thursday, May 4, 2017; from 6pm to 8pm at the Veterans Memorial High School Auditorium (you will provide mailing address for invitation on Page 1 of application). **Only “first in family” graduates who have completed the Graduate Application and submitted it by March 10th, and who are on the list for graduation, will be able to participate and receive the item(s) mentioned above.**
* **Questions?** Contact your high school counselor’s office, or call Eloisa Dowiat with CCISD Communications at (361) 695-7410, email Eloisa.Dowiat@ccisd.us.

**DON’T FORGET:** SUBMIT THE GRADUATE APPLICATION (two pages, attached) AND SCHOLARSHIP APPLICATION TO YOUR COUNSELOR’S OFFICE BY **FRIDAY, March 10th!**

# 2017 “FIRST IN FAMILY” GRADUATE

\*\*\* APPLICATION \*\*\*

#### *\*\*DUE FRIDAY, MARCH 10th to Your High School Counselor\*\**

\*\*EXCLUSIVELY FOR CCISD GRADUATING SENIORS WHO WILL BE THE FIRST IN THEIR FAMILIES TO EARN A HIGH SCHOOL DIPLOMA THIS YEAR, MAY-JUNE 2017\*\*

#### *PLEASE TYPE OR PRINT VERY CLEARLY TO ENSURE PROPER SPELLING FOR RECOGNITION!*

NAME:

(First) (Middle) (Last)

MAILING ADDRESS:

CITY: STATE: ZIP CODE:

HOME PHONE: CELL PHONE:

EMAIL ADDRESS:

T-SHIRT SIZE (Circle One): Small Medium Large X-Large 2XL 3XL LIST ALL SCHOOLS YOU HAVE ATTENDED IN CORPUS CHRISTI:

Elementary:

Middle School:

High School:

PARENT’S NAME(S)*:*

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| --- | --- | --- |
|  |   | RELATION:  |
| (First) | (Last) | (Father? Mother? Step-Parent?) |

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|  |   | RELATION:  |
| (First) | (Last) | (Father? Mother? Step-Parent?) |

\*If additional, please submit on separate sheet with this form. Note: No siblings please. Only parents/guardians who raised you (or financially supported you) to help you achieve graduation.

PARENT’S EMAIL ADDRESS:

PARENT’S PHONE NUMBER(s):

*2017 First in Family Graduate Application - Page 1*

**RECOGNITION STATEMENT:** In the box provided, please make a statement that can be printed for recognition at the event, explaining (1) What it means to you to be the first in your family to graduate from high school and what, if any, challenges you had to overcome, and (2) a brief “thank you” to anyone who helped you achieve this goal (family, teacher(s), etc.) ***NOTE: If you are completing a CITGO scholarship application, you do not have to complete this statement … instead, we will pull quotes from your scholarship statement/essay for this purpose. Thank you.***

**ACKNOWLEDGEMENTS (Initial each statement):**

 I verify that I am the very first person in my immediate family (including my parents) to graduate from high school.

 I understand that I can only receive this recognition by completing this graduate application (attached) in its entirety, AND provided that I remain on the graduation list at my school.

 I understand that I am highly encouraged to complete the attached CITGO First in Family Scholarship application, for $1,000 awards being provided this year to only First in Family graduates who are attending college or trade school this Fall.

 I understand that to receive all benefits and awards associated with being a First in Family graduate, I must have submitted this application to my high school counselor no later than Friday, March 10, 2017. I also acknowledge that I must receive an invitation for me and my family to attend the First in Family graduate ceremony on Thursday, May 4th, and receive my graduation medal and other awards at that event.

SIGNED: Date:

PARENT/GUARDIAN SIGNATURE:

#### *\*\*\*DUE FRIDAY, March 10, 2017 to HS Counselor\*\*\**

*2017 First in Family Graduate Application – End of Application - Page 2*



**CITGO First in Family Scholarship – 2017**

**DEADLINE: March 10, 2017**

**Scholarship Eligibility –** Applicant must be a graduating CCISD high school senior who will enroll in college in the fall immediately following graduation, and who is the first in his/her immediate family (including parents) to earn a high school diploma. Selected recipients will each be awarded a $1,000 scholarship to assist with tuition and fees, paid directly to an accredited United States college, university or trade school of choice in Fall 2017. Scholarship recipient must enroll in a minimum of 12 semester hours to be eligible for this scholarship.

**Applicant Contact Information –** Type or print in black or blue ink.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last Name First Name Middle Initial

Permanent Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street Apt#

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 City State Zip Code

Cell-phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_

High School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID# : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I certify the information provided in this application is, to the best of my knowledge, true and correct. I understand this application is subject to verification by the Corpus Christi Education Foundation at its discretion.

My signature serves as permission for the Corpus Christi Education Foundation to publish my name and photos in the event I receive a scholarship.

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_

Student’s Email \*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IF APPLICANT IS UNDER 18, THE SIGNATURE OF A PARENT OR GUARDIAN IS REQUIRED**:

I certify the information provided in this application is, to the best of my knowledge, true and correct. I understand this application is subject to verification by the Corpus Christi Education Foundation at its discretion.

My signature serves as permission for the Corpus Christi Education Foundation to publish my child’s name and photos in the event he/she receives a scholarship.

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

Parent’s/Guardian’s Email\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\*Email addresses will be used to communicate with you regarding your application and to keep you informed of other opportunities from the Corpus Christi Education Foundation. Your contact information will NOT be provided to any other organization, and will NOT be added to any third party mailing lists*

**High School Scholastic Achievement:**

**To ensure eligibility for this scholarship award, you MUST include the following:**

* **Attach a copy of your most recent high school transcript, with GPA and course grades clearly visible, to this application** (note: GPA is usually listed at the bottom of the page – be sure it’s not cut off in a copy submitted).

**Financial Need:** Financial need is considered with regard to this scholarship. Please include a copy of your Student Aid Report (SAR), **or (only if SAR is unavailable)**, your parents’ most recent Federal Tax Form 1040.

**School Involvement:** List school-related activities and athletics in which you have participated during high school and CHECK THE BOX for each school year you participated. ***Please do not attach additional information; if you have more than what is listed here, choose the top six activities on your list.***

**School Activity / Organization** Freshman Sophomore Junior Senior

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**Awards and Honors:** List awards and honors (excluding those shown above) which you received while in high school, and CHECK THE BOX for the school year that you received the honor. ***Please do not attach additional information*.**

**Honors/Awards Received** Freshman Sophomore Junior Senior

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**Community Involvement:** List non-school related community activities which you have been involved in / volunteered for during high school, and CHECK THE BOX for each school year you participated. ***Please do not attach additional information.***

**Community Involvement / Volunteerism** Freshman Sophomore Junior Senior

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**Employment:** Beginning with your present or most recent job, list your employment history (if applicable), and CHECK THE BOX for each school year you worked in that position. ***Please do not attach additional information.***

**Employment History** Freshman Sophomore Junior Senior

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**Personal Statement (Essay):** Please attach a ***typed***, one-page essay between 250 and 500 words. Include both of the following items in your essay:

1. What it means to you to be the very first in your family to earn a high school diploma. Share how your family has helped you, the kind of commitment it took to achieve this goal, and what you would say to those who made a difference for you along the way (parents, teachers, community members, etc.)

***— AND —***

1. State your plans after high school, in particular what you plan to achieve in higher education (college, trade school) and in a future career.

**College Plans: What college/university or trade school do you hope to attend in Fall 2017?**

1st Choice: Date of Acceptance: \_ Name of College/University

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Mailing Address of Financial Aid Office

2nd Choice: Date of Acceptance: \_\_\_\_\_\_\_\_\_ Name of College/University

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 Mailing Address of Financial Aid Office

Major or intended major(s):

Intended career:

**Application Checklist & Attachments -** Please do not use staples

***IMPORTANT:******Did you remember to …***

* Complete and sign this four-page application form?
* Include a copy of the required transcript which includes GPA and student name clearly visible?
* Include a copy of your Student Aid Report (SAR), or (if unavailable) your parent’s most recent Federal Tax Form 1040?
* Include your **typed** personal statement (essay), with **BOTH** of the important questions answered?

**SUBMIT COMPLETED APPLICATION AND DOCUMENTS TO YOUR**

**HIGH SCHOOL COUNSELOR NO LATER THAN FRIDAY, MARCH 10, 2017.**

***Counselors:*** *Please submit all scholarship applications for your students-- scanned/emailed by the deadline.*

**Scan/email completed applications and supporting documentation to:** Eloisa.Dowiat@ccisd.us

**Submit by the deadline: Friday, March 10, 2017.**

**Late applications will not be considered.**