COLLEGE CARE PACKAGE DONATION
2018-2019

One Step Closer Foundation, Inc. (OSC) is a dynamic registered 501 c(3) nonprofit organization with a mission to create employment opportunities, limit educational debt and strengthen academic achievement for all individuals who aim to move One Step Closer toward the next big thing that awaits. This entity was birth out of the for-profit entity called One Step Closer: Finding the Fun in Math, an organization committed to helping individuals find the fun and fascination in the study of mathematics. The motto is Mentorship through Mathematics - touching and understanding the whole person by integrating mathematic applications in their everyday environment.

Eligibility Requirements
All undergraduate (2yr or 4yr) college students are eligible to apply. All applicants must be a U.S. Citizens, 24 years or younger, must have taken or is registered for at least 3 credits of mathematics courses or 6 credits of STEM courses, and have a minimum GPA of 2.7. The college care package application process is on a first come first serve basis. Applications can be submitted starting Dec 26, 2018- until February 4, 2019. Incomplete applications will not be reviewed for admission. All questions should be answered, and all required documents should be included in the applicant’s final submission.

Required Documents:

☑ A completed application form
☑ Resume
☑ Registered Classes (At least 1 math class is registered)

Completed applications should be emailed to ffort@onestepcloser2.com

If you have any questions:

Call (202) 766-6431 or email ffort@onestepcloser2.com for more information.

All applications for the Care Package are due February 4, 2019 (11:59pm)
COLLEGE CARE PACKAGE APPLICATION

2018-2019

Student status academic year 2018-2019, I am a: ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior

APPLICANT GENERAL INFORMATION:

Name: ________________________________________________

Phone: ____________________________________________

Home Address: ______________________________________

City, State, Zip Code: ________________________________

Email Address: ______________________________________

Date of Birth: ______________________________________

US Citizen ☐ Yes ☐ No

Gender ☐ Male ☐ Female

Race/Ethnic Background __________________________________

Do you have a Mentor: ☐ Yes ☐ No

Mentor Name: ________________________________________

Mentor Email: _______________________________________

EDUCATIONAL HISTORY:

COLLEGE

College Name: _______________________________________

Mailing Address: _____________________________________

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Phone: ________________________________

Major: ______________________________

Minor: ______________________________

Name of Academic Advisor: ________________________________

I am a                                      □ Full-time □ Part-time college student

Actual or expected date of graduation: ____________________________

Month Day Year

Current Grade Point Average (GPA): ______________________________

Math courses you have taken: ______________________________

Name the top 3 care package items that will help you succeed through college
1. 
2. 
3. 

Do you live in a Dorm                                      □ Yes □ No

The undersigned hereby certifies that the information provided in this application is true to the best of their knowledge. Knowingly providing erroneous or misleading information will render this application void for consideration.

Student (Applicant) Signature ______________________________  Date: ______________

Parent/Guardian (If Applicable) ______________________________ Date: ______________

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