



RiseUp Community Development Corporation

PO Box 940 Renton, WA 98057

E-mail: info@RiseUP-CDC.org

www.RiseUp-CDC.org

Board of Directors

RiseUp-CDC 2022 Scholarship Application

Please attach this sheet as your Front Cover page

Rhonda Wilkerson Chair

> Cheryl Keyes Co-Chair

Bonnie Wong Secretary

> Mary Reed Treasurer

James Hampton

Damon Harris

Andres Villalba

Rev. Dr. Leslie D. Braxton Member at Large

Today's Date		
Applicant Name		

The following are the Scholarship Eligibility Requirements in order to be considered:

The student must:

- Reside in the Puget Sound Area
- Be Accepted/Enrolled Into an accredited college, University or Professional School (anywhere in the country, or abroad)
- Have a 2.5 GPA or better
- Have demonstrated any one or combination of the following:
 - Strong Record of Community Service
 - Leadership Ability
 - Positive Citizenship

Required Documents to Submit:

- □ The RiseUp-CDC Scholarship Application
 □ A Personal narrative outlining your community service, leadership, positive citizenship for 2021
 □ (2) Letters of Recommendation on school or business letterhead
- ☐ An Official Transcript for the 2021 2022 School Year

Deadline:

All Scholarship Documents must be postmarked or e-mailed by June 4, 2022

Return to: RiseUp-CDC Scholarship

Attn: Rhonda Wilkerson

PO Box 940

Renton, WA 98057

E-mail to: info@RiseUp-CDC.org

"



Email Address

RiseUP Community Development Corporation 2022 Scholarship Application

Please Print Legibly

First Name	Middle Name	Last Name
Parent or Guardian Name		
☐ Male ☐Female		
Gender	Birth Date	
☐ African American	☐ Asian	☐ Pacific Islander
☐ Hispanic/Latino	☐ Caucasian	□Other
☐ Hispanic/Latino Ethnicity	☐ Caucasian	□Other
	☐ Caucasian	□Other
	☐ Caucasian	□Other
		□Other
Ethnicity		□Other
Ethnicity Mailing Address (Not School A		□Other
Ethnicity		Other
Ethnicity Mailing Address (Not School A		Other
Ethnicity Mailing Address (Not School A		□Other Zip
Ethnicity Mailing Address (Not School A	.ddress)	
Ethnicity Mailing Address (Not School A	.ddress)	



First Year Students

☐ Returning Student, Not Currently Enrolled

High School Senior	□Yes	□No			
Name of High School					
			□Yes	□No	University, College, Technical or Trade School Acceptance Received?
Graduation Date	GPA				
Name of Institution					
Continuing Education	Stude	ents			
☐ Undergraduate Degree Program		GPA			
Name of University, College, Te	chnical	or Trade	School		
Current Year Designation					
☐ Freshman	□ Sop	homore			☐ Junior
☐ Senior	☐ Other (Please Specify)) [
				l	
☐ Graduate Degree Program				GPA	
☐ Masters Degree, MDiv.	Specify	Degree:			
☐ Ph D., D. Min	Specify	Degree:			
☐ Other	Specify	Degree:			
				l	