



# FRANKLIN COUNTY CHILDREN SERVICES

Protecting Children by Strengthening Families

## Youth Scholarship Transcripts and Reference Letters

2025

### Two ways of completing this Form:

**1. Complete Electronically**

Ensure you save the application after completing and email to [FCCSVolunteers@fccs.us](mailto:FCCSVolunteers@fccs.us)

**2. Print and Complete**

Email to: [FCCSVolunteers@fccs.us](mailto:FCCSVolunteers@fccs.us)

Or Mail:

Franklin County Children Services

ATTN: Scholarship Committee

855 W Mound Street

Columbus, Ohio 43223

**Questions?  
Contact:**

Chuck Cochran,  
College Bound Mentor Coordinator  
[cjcochra@fccs.us](mailto:cjcochra@fccs.us) / 614-275-2598

or

FCCS Volunteers Department  
[FCCSVolunteers@fccs.us](mailto:FCCSVolunteers@fccs.us) or 614-275-2690

# **SCHOLARSHIP APPLICATION - PART D**

**(Academic Status & Standing)**

**To be completed by High School Administration**

Student's Name: \_\_\_\_\_

(Last)

(First)

(MI)

## **To be completed by school counselor or administrator:**

The student referenced above is applying for a scholarship/ stipend available through the Franklin County Children Services Scholarship Fund. The Scholarship Committee would appreciate any assistance you can offer this applicant in the completion and submission of this application package. For your information, the package is structured as follows:

Part E Academic Status and Standing - Must be completed by a school counselor or administrator.

Part F

-

Personal Recommendations - Two recommendations are required. One must be completed by a school official such as: teacher, counselor, school administrator or coach. The second may be completed by a non-relative of the applicant's choice.

The completed application package must be received by the Scholarship Committee ***no later than January 31st, 2025***, to qualify this candidate for consideration for the available scholarships.

GPA \_\_\_\_\_ for \_\_\_\_\_ Semesters

## **Please attach student's transcript and test scores (if available).**

\_\_\_\_\_  
Printed Name of Authorized School Official Title \_\_\_\_\_

**X** \_\_\_\_\_  
Signature of Authorized School Official School \_\_\_\_\_

- **If applicant is applying for Douglas C. Moore Trade and Technical Scholarship and has obtained a GED (Graduate Equivalency Degree) Please submit your GED Certificate in place of completing Scholarship Application Part B.**

# **SCHOLARSHIP APPLICATION - PART E - 1**

(High School Recommendation)

Please proceed to Scholarship Application-Part F-2 if you are applying for Douglas C. Moore Scholarship and have a GED (Graduate Equivalency Degree)

Student/Applicant Name: \_\_\_\_\_

To the person writing this recommendation,

This recommendation is required to be completed by a high school teacher, counselor, school administrator, coach, or principal.

You are being asked to provide information in support of the above-named individual who is applying for an academic scholarship offered by the Franklin County Children Services Scholarship Committee. With a successfully completed and submitted application, the student will be eligible for up to seven different scholarship opportunities.

In fairness to the applicant, we ask that you give immediate and serious attention to this recommendation. Please note the Scholarship Committee may contact you directly for additional information if necessary.

## **Instructions**

Submit Recommendation Letter by **January 31<sup>st</sup>, 2025**

Email or mail the entire page back to:

[fccsvolunteers@fccs.us](mailto:fccsvolunteers@fccs.us)

OR

Franklin County Children Services  
Scholarship Committee  
ATTN: FCCS Volunteers Department  
855 W. Mound Street  
Columbus, Ohio 43223

1. What is your relationship to the applicant? \_\_\_\_\_

2. What qualities and characteristics does the applicant have which will equip him/her for the demands of post-high school academic study? Please include your in your answer your assessment of the applicant's organizational skills, ability to demonstrate self-advocacy, critical thinking skills, and conflict, stress management skills.

3. What three adjectives best broadly describe the applicant?

4. As the Scholarship Committee reviews this application, what factors or circumstances do you feel warrant special consideration?

Please include your:

**Name/Title:** \_\_\_\_\_ **Mailing Address:** \_\_\_\_\_

**Phone # (s)** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**SCHOLARSHIP APPLICATION – PART E - 2**  
**(Personal Recommendation)**

**Applicants who received a GED are required to submit two personal references.**

Student/Applicant Name: \_\_\_\_\_

To the person writing this recommendation,

This recommendation is required to be completed by a high school teacher, counselor, school administrator, coach, or principal.

You are being asked to provide information in support of the above-named individual who is applying for an academic scholarship offered by the Franklin County Children Services Scholarship Committee. With a successfully completed and submitted application, the student will be eligible for up to seven different scholarship opportunities.

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Please include your:

**Name/Title:** \_\_\_\_\_ **Mailing Address:** \_\_\_\_\_

**Phone # (s)** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_