



# Holliday's Helping Hands

*Holliday's Helping Hands Foundation, Founder & CEO, Katina Holliday  
Scholarship Committee Chairpersons, Rachelle McClendon-Alexander, Twila Proctor & Suzanne Brown*

## **HHH STUDENT SCHOLARSHIP APPLICANT GUIDELINES**

Thank you for your interest in the **2023 HHH Scholarship for Graduating High School Students**. HHH is an amazing organization that strives to work together to build a better quality of life for disenfranchised individuals through love, faith and giving second chances.

The HHH Student Scholarship is to assist and encourage deserving students graduating from high school in 2023 to attend a college or university. The scholarship will be \$1000 for one academic year and will be awarded to cover related educational expenses (e.g. fees, tuition, books, and transportation) for one year only. To ensure that your application will be given the consideration that it deserves, you must complete all items and meet the deadline.

**For your application to be considered complete, it must include the following:**

\_\_\_\_ Completed and signed application and consent form. (Must include parent/guardian signature)

\_\_\_\_ Applicant must be enrolled in a four-year college or university for the scholarship year of 2023-24

\_\_\_\_ A copy of the enrollment/registration letter from the college or university must be submitted with the application (or acceptance letter, or first semester course registration)

\_\_\_\_ Copy of electronic transcript that includes GPA.

\_\_\_\_ The cumulative GPA must be 2.5 or higher. (ALL GRADE POINT AVERAGES ARE BASED ON a 4.0 SCALE)

\_\_\_\_ TWO letters of recommendation must be submitted from the following individuals:

- (a) Past or present instructor or advisor
- (b) Sponsor of an organization (school or non-school) in which the applicant has been active
- (c) Pastor or member in leadership at the applicant's church of membership

### **NO RECOMMENDATIONS FROM FAMILY MEMBERS**

\_\_\_\_ A wallet-size picture of yourself (non-returnable electronic submission is acceptable)

\_\_\_\_ A completed application including personal information, education, work/volunteer experience, activities, and/or hobbies.

\_\_\_\_ Write a 500-word essay: How can and will you contribute to serving the homeless population or address solving the homelessness issue in your community, city, state, or country, post-graduation. Also, include lessons learned in light of the pandemic, what have you learned about yourself personally.

\_\_\_\_ Be available for an interview (FaceTime/Zoom, May 4<sup>th</sup> – 12<sup>th</sup>, day and time TBD)

\_\_\_\_ Be available to participate in Scholarship Awards Presentation via Zoom (Tentatively June 23, 2023)

**Completed application must be emailed to: [rachelle@hollidayshh.org](mailto:rachelle@hollidayshh.org); [twila@hollidayshh.org](mailto:twila@hollidayshh.org);  
[rori@hollidayshh.org](mailto:rori@hollidayshh.org) by **April 28, 2023****



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Holliday's Helping Hands will award ten (10) \$1000.00 scholarships to ten (10) 2023 high school graduates.

## Holliday's Helping Hands 2023 Scholarship Application

### **1. PERSONAL INFORMATION**

NAME: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_

EMAIL: \_\_\_\_\_ HOME ADDRESS: \_\_\_\_\_

NAME OF PARENT/GUARDIAN (Print): \_\_\_\_\_

PARENT/GUARDIAN (Signature): \_\_\_\_\_

ADDRESS (If different from above): \_\_\_\_\_

### **2. REFERRAL** (who referred you, or recommended you for this scholarship)

HHH employee\* \_\_\_\_\_ Social Media \_\_\_\_\_ HHH Website \_\_\_\_\_ Family\* \_\_\_\_\_ Friend\* \_\_\_\_\_

\*Please write their name \_\_\_\_\_

### **3. HIGH SCHOOL**

SCHOOL NAME: \_\_\_\_\_

GRADE POINT AVERAGE: (submit copy of electronic transcript with application) \_\_\_\_\_

### **4. HONORS AND AWARDS RECEIVED DURING HIGH SCHOOL/COLLEGE:**

List any scholastic, athletic, community, and /or school service awards you have received.

AWARDS (Reason for Award)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_



**Holliday's**  
Helping Hands

4. \_\_\_\_\_
5. \_\_\_\_\_

**5. EXTRA-CURRICULAR ACTIVITIES:** (*School, Civic, Religious, Social Organizations, etc.*)

Name of Group/Activity/Office Held

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**6. EDUCATIONAL/CAREER OBJECTIVE:**

COLLEGE MAJOR:

- 1.
- 2.

CAREER OBJECTIVES/GOALS:

- 1.
- 2.

ADDITIONAL INFORMATION (any add'l that you would like the scholarship committee to know):

- 1.
- 2.



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**7. WORK AND RESIDENCE INFORMATION:** *Describe your work experience, if any. Include volunteer work.*

Employer/Position

- 1.
- 2.
- 3.

**8. PERSONAL ESSAY:**

Write a typed 500-word essay (1 page) on the topic of “How can and will you contribute to serving the homeless population or address solving the homelessness issue in your community, city, state, or country, post high school graduation.”

**Please attach your essay.**

**9. APPLICANT CONSENT:**

I certify that I am a high school graduate student in good standing at \_\_\_\_\_  
\_\_\_\_\_ High School, located at:

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

City \_\_\_\_\_, State \_\_\_\_\_.

I am officially enrolled at \_\_\_\_\_ University/College and plan to attend in Fall 2023. I also certify that the information in this application is accurate and true. My signature on this application indicates that I have read all the criteria and details of this scholarship application and am eligible for submission.

Applicant Name (Print): \_\_\_\_\_

Applicant Signature & Date: \_\_\_\_\_

**Parent/Guardian Authorization:**

Name (Print): \_\_\_\_\_

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



# Holliday's Helping Hands

I/We, ("Parent/Guardian"), as parent(s) or legal guardian(s) of, give permission for Holliday's Helping Hands to publish on the internet or media still photographs taken of my child during activities specifically related to The HHH Scholarship Program, without payment or any consideration and without notifying me.

I/We understand and agree that these photographs will become the property of HHH, which shall have complete ownership of the photographs. I hereby irrevocably authorized the HHH to publish or distribute these photographs for the purpose of publicizing HHH's programs, including The Holliday's Helping Hands Scholarship Program or for any other lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my child's likeness appears. Additionally, I waive any rights to royalties or other compensation arising out of or related to the use of the photographs.

I/We hereby hold harmless and release and forever discharge HHH and any of its founders, CEO, COO, and employees, and assigns from any and all claims, costs, suits, actions, judgments, and expenses which my child, his/her heirs, representatives, executors, administrators, or any other persons acting on his/her behalf have or may have by reason of the use of the photographs. This release specifically includes, without limitation, a complete release and discharge of any liability by virtue of any editing, distortion, alteration, or optical illusion, whether intentional or otherwise, that may occur or be produced in the taking of or editing of said photographs, unless it can be shown that such was maliciously caused, produced and published solely for the purpose of subjecting my child to conspicuous ridicule, scandal, reproach, scorn and indignity.

I/We hereby certify that I/we are the parents/guardians of \_\_\_\_\_, and do hereby give my/our consent without reservation to the foregoing on behalf of my/our child.

Applicant (Print Name): \_\_\_\_\_

Applicant (Signature): \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian (Print Name): \_\_\_\_\_

Parent/Guardian (Signature): \_\_\_\_\_