

# THE FRUIT OF THE VINE SCHOLARSHIP 2017 Guidelines

The Fruit of the Vine Scholarship Fund benefits graduating Napa County high school seniors and Napa Valley College transfer students who plan to attend a four-year college/university and will find the cost of higher education a financial hardship. Previous recipients who are currently attending college are eligible to apply again in subsequent years.

## **DEADLINE FOR SUBMISSION IS MARCH 7, 2017**

#### WHO'S ELIGIBLE

- Napa County graduating high school seniors
- Napa Valley College students who will be transferring to a four-year college/university in fall 2017
- Previous recipients of the scholarship completing their first, second, or third year of college
- Candidates must:
  - be in good academic standing
  - have a cumulative Grade Point Average (GPA) of at least 3.0
  - be planning to attend an accredited, non-profit, four-year college/university pursuing undergraduate study in any field (preference may be given to applicants planning to attend a California public university)
- Preference given to:
  - > first generation college students (i.e. neither parent has obtained a Bachelor's Degree)
  - students who are employed (or have a parent or guardian who is employed) in the Napa County wine or grape industry
- Consideration will be given to the:
  - > candidate's financial need
  - > candidate's community involvement

#### **HOW TO APPLY**

Email the items listed below (as attachments) to Ellen Drayton at <a href="mailto:ellend@napavalleycf.org">ellend@napavalleycf.org</a> (if you don't have access to email, please call to make other arrangements):

## If you are a graduating high school senior or Napa Valley College transfer student:

- Completed two page application form
- □ 500 word essay in response to question 1-a on page 1 of the application
- □ 250 words describing your community service activities
- □ A copy of your unofficial transcript
- One academic letter of recommendation from a teacher, counselor or administrator
- A copy of the page from your FAFSA Student Aid Report or California Dream Act Student Aid Report showing your Expected Family Contribution (EFC)- if applicable

#### If you are a previous recipient of the scholarship:

- Completed two page application form
- □ 500 word essay in response to question 1-b on page 1 of the application
- □ 250 words describing your community service activities
- □ A copy of your current unofficial transcript showing credits and grades
- One academic letter of recommendation from a professor, counselor or administrator
- □ A copy of the page from your FAFSA Student Aid Report or California Dream Act Student Aid Report showing your Expected Family Contribution (EFC)- *if applicable*

#### QUESTIONS?

Contact Ellen Drayton, Manager of Grants Administration & Scholarships, at (707) 254-9565 ext. 14 or <a href="mailto:ellend@napavalleycf.org">ellend@napavalleycf.org</a>



# THE FRUIT OF THE VINE SCHOLARSHIP 2017 Application Form

Page 1 of 2

## HOW TO APPLY (DEADLINE FOR SUBMISSION: MARCH 7, 2017)

Candidates must submit a completed two page application form, along with the items listed under "Application Materials" as attachments, to Ellen Drayton, Manager of Grants Administration & Scholarships, via email at <a href="mailto:ellend@napavalleycf.org">ellend@napavalleycf.org</a> on or before March 7, 2017. Incomplete applications, applications not including the required attachments or applications that arrive after the deadline will not be considered. NOTE: Scholarship must be used for educational expenses included in the cost of attending college or university. We encourage its use for nontaxable purposes including tuition, books, fees or equipment required for coursework.

#### APPLICANT CONTACT INFORMATION

| I am (check one):       | <ul> <li>□ a graduating Napa County high school senior</li> <li>□ a Napa Valley College student transferring to a four-year college/university in fall 2017</li> <li>□ a previous recipient of the Fruit of the Vine Scholarship</li> </ul> |
|-------------------------|---|
| First name:             |   |
| Last name:              |   |
| Permanent mailing ad    | dress:  |
|                         |   |
| Phone number:           | Email:  |
| Name of your high sch   | nool:   |
| Name of college/unive   | ersity you plan to attend or currently attend:  |
| Number of family men    | nbers currently living in your home:  |
| Number of family men    | nbers in your household (including you) who will attend college during the 2017-2018 academic —   |
| What is the highest lev | vel of education completed by your parent(s)?   |
| Do you or your parent   | s/guardians work in the Napa County wine or grape industry?   I do  parent/guardian  No   |
| If yes, what is the nam | ne of your/their employer(s)?   |

#### **APPLICATION MATERIALS**

- 1. In a separate Word document, please answer the applicable essay question in *no more than 500 words*:
  - a. <u>Graduating High School Seniors & Napa Valley College Transfer Students</u>: What are your educational and career goals for college, and if you are the first person in your family to attend college, please tell us why attending college is important to you?
  - b. Previous Scholarship Recipients:
    - Please describe any changes in your career or academic goals since you started college and the progress you have made toward these goals.
- In a separate Word document (250 words or less), please list the community service activities in which you have been involved, the number of hours per week you devote to these activities and the roles and responsibilities you performed.
- 3. A copy of your unofficial transcript
- 4. One academic letter of recommendation from a teacher/professor, counselor or administrator
- 5. A copy of the page from your FAFSA Student Aid Report or California Dream Act Student Aid Report showing your Expected Family Contribution (EFC)- if applicable (see page 2 for instructions)
- 6. Completed and signed application form (pages 1 and 2)



# THE FRUIT OF THE VINE SCHOLARSHIP 2017 Application Form Page 2 of 2

| Student Name:   |  |  |  |
|---|--|--|--|
|   |  |  |  |
| STUDENTS WHO ARE <u>ELIGIBLE</u> TO FILE FAFSA:   |  |  |  |
| Before completing this form you will need to file your Free Application for Federal Stude applications may be submitted starting October 1 and can be found at <a href="https://fafsa.ed">https://fafsa.ed</a> as early as possible! It can take between three days and three weeks after you submit to receive your Student Aid Report (SAR) with your Expected Family Contribution (EF scholarship application. Please include a copy of the page of your SAR showing your scholarship application. | <ul><li>.gov/. Submit your FAFSA<br/>nit your FAFSA application<br/>(C) which is needed for this</li></ul> |  |  |
| 1. What is your Expected Family Contribution (EFC) as determined by the <b>FAFSA</b> ?  |  |  |  |
| 2. Please check the statement that applies to you: ☐ I am a DEPENDENT ☐ I   | am an INDEPENDENT  |  |  |
| STUDENTS WHO ARE <u>INELIGIBLE</u> TO FILE FAFSA:   |  |  |  |
| Students who are ineligible to file the FAFSA application are still eligible to apply for to not eligible to file the FAFSA, you must fill out the California Dream Act Application (Dream Act Application is available online at <a href="https://dream.csac.ca.gov/">https://dream.csac.ca.gov/</a> . You must in from your California Dream Act Student Aid Report showing your Expected Family Co submit your scholarship application.  | (if eligible). The Californian nclude a copy of the page   |  |  |
| 1. What is your Expected Family Contribution (EFC) as determined by your CA Dream Act   | Application?   |  |  |
| 2. Please check the statement that applies to you: ☐ I am a DEPENDENT ☐ I   | am an INDEPENDENT  |  |  |
| * <b>PLEASE NOTE:</b> You should fall into one of the two categories listed above, but if for not eligible to file the FAFSA or the California Dream Act application, then please subparent/guardian's federal tax return. You can submit your own tax return if you are a  | omit your  |  |  |
| REQUIRED SIGNATURES (for all applicants):   |  |  |  |
| I (we) certify that all of the information on this form is true and complete to the best asked by any authorized official of Napa Valley Community Foundation, I (we) agree information given on this form. I (we) realize that this proof may include a copy of a Unicome tax return. I (we) realize that failure to comply with a request for further infapplicant from receiving the scholarship.  | to give documentation for<br>J.S. tax return and/or state  |  |  |
| Applicant's Signature   | Date   |  |  |
| Parent or Guardian's Signature (if the student is a dependent)  | <br>Date   |  |  |