

Please Note: This scholarship is a three-step process. First Step: All scholarship applications will be collected from the districts we serve (Ballard, Calloway, Carlisle, Fulton Co, Fulton Indp, Graves, Hickman, Marshall, Mayfield, Murray & Scholar House/McCracken Co) and reviewed by the Murray Head Start Policy Council. Our Policy Council will select one applicant to represent Murray Head Start at the state level. This individual will receive a \$200 scholarship from Murray Head Start. Second Step: If the Murray Head Start applicant wins at the state level their application will be forwarded to the regional level (compete among 9 states). Third Step: If selected at the regional level the winner will receive a \$1500 scholarship. Our staff will assist the applicant throughout the scholarship process.

This scholarship is designed to recognize a Head Start graduate who is making significant contributions to their community and to encourage their continuing education at an institution of higher learning. The scholarship recipient will receive a commemorative plaque and is eligible to receive a one-time scholarship award of \$1500 to be applied to an institution of higher learning for the attainment of an undergraduate degree. **Applicant must be a former student and graduate of Head Start.**

**Criteria:** Failure to meet any of the criteria will result in automatic elimination.

1. **Applicant must be a former student and graduate of Head Start.**
2. Applicant must prove acceptance or enrollment in an institution of higher learning.
3. Three (3) letters of reference must be included with the application.

**Questionnaire (70 points):** On a separate sheet, please type your answers to the following two questions. The maximum point value for each question is indicated in parentheses. Judges will rate specific, not subjective, information.

1. (30 points) Financial need: Include a brief statement of the need for financial assistance.
2. (40 points) Personal statement: Discuss in 300 words or less (no more than one double spaced, typed page) your goals and an aspiration for furthering your education and the role Head Start/Early Head Start has played in your education. Include the years that you attended Head Start/Early Head Start.

**Letters of Reference (30 points):** Include three letters of reference from people who can verify the nominee's work, volunteer service, and other activities. Letters will be judged on specific information and **should be no longer than one typewritten page**. Judges will rate the overall effectiveness of the letters. **Applications that do not include all three references will not be considered for this award.**

**Submission Checklist** Please check each box to indicate that all required materials are attached, then route according to the steps listed below.

- Complete application form
- Questionnaire responses
- Three letters of reference

***Please return the application along with all the required materials to your school district's Family Service Worker located at your school district's Preschool/Head Start office by April 18, 2025.***

## Celebrating Head Start Heroes

### Scholarship for Head Start Alumni, High School Senior

Be sure to complete the form below in its entirety.  
All fields are required. Please type or print clearly.

**For Administrative Use Only:**

Local Program Director  
*initial here before submitting to the state association.*

State Association President  
*initial here before submitting to RIVHSA*

**Nominee**

Nominee		Social Security#	Only the scholarship winner will have to provide SS#	Date	
State		Program Member#	-----	Individual Member#	N/A
Mailing Address of Nominee					
City		State		Zip Code	
Telephone		E-Mail			

**Head Start/Early Head Start Director**

Name	Cindy Graves				
Telephone	270-753-6031	Fax	270-753-8599		
E-mail	cindy.graves@murray.kyschools.us				

**Nominating Grantee** (Use agency information not the local center. Indicate the formal grantee name; no abbreviations)

Name	Murray Head Start				
Grantee Mailing Address	208 South 13th Street				
City	Murray	State	KY	Zip Code	42071
Telephone	270-753-6031	Fax	270-753-8599		

**Submission Checklist:** Check each box to indicate that required materials are attached.

- Application Form
- Letters of Reference
- Proof of acceptance at or enrollment in an institution of higher learning

Statements:

- Financial Need
- Educational and Personal Goals

**Application Process:** Nominations will be processed by phase as indicated below:

- **NOMINEE:** Submit all items listed above to your local Head Start/Early Head Start grantee
- **GRANTEE:** Submit local recipients to your state association. Contact your state association for filing deadline.
- **STATE ASSOCIATION:** Submit state recipients to RIVHSA by the filing deadline.