



## **Holly Area Community Coalition Scholarship 2024**

The vision of the Holly Area Community coalition “Is a community of youth who have been empowered to make positive life choices.” In following this vision the Holly Area Community Coalition is offering a \$500 non-renewable scholarship. The scholarship will be awarded to a graduating Holly High School senior who has chosen to be drug/alcohol free during their high school years. The purpose of the scholarship is to assist the student with expenses associated with attending a college, university or trade school of their choice.

### **The application must include:**

- **The application Form**
- **Answer sheet(s) from required questions**
- **Two letters of recommendation from adults who are not relative**
- **PLEASE STAPLE SHEETS TOGETHER**

A rubric will be used in scoring the application. Please complete all parts of the application.

Applications must be returned to the counseling office no later than April 2, 2024 The scholarship will be awarded at the Holly High School’s Spring Awards Assembly. The monetary award will be sent directly to the post high school institution. Recipients will need to notify the Coalition of the selected institution, along with the contact name for the financial aid office. Any questions should be directed to Mrs. Price at (248) 328-3230 or the Coalition Office at (248) 328-3125.

**DEADLINE April 2, 2024**

**Holly Area Community Coalition  
Scholarship Application  
2024**

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone (s) \_\_\_\_\_

Email Address \_\_\_\_\_

Name of College, University or Trade School \_\_\_\_\_

Financial Aid Office Address \_\_\_\_\_

Course of Study or Major \_\_\_\_\_

Citizenship *-Provide two letters of recommendation from adults who are not relatives.  
(ie: teacher, counselor, clergy, coach)*

On a separate sheet (s) of paper answer the following three questions, and attach to the application:

1. List any extracurricular activities and your role/involvement in each:(ie school, sports, church, organizations, volunteer, community service)
2. Please explain why you have chosen to be drug/alcohol free during your high school years and how has this benefited you ?
3. Why should you be awarded this scholarship?

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

***The completed application must be returned by April 2, 2024 to the counseling office.***