**DR. RENEE H. LACEY SCHOLARSHIP APPLICATION**

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Dr. Lacey provided our nontraditional students with love, support, kindness, leadership, and modeled a passion for doing what was best and needed for our students. Her dedication to our nontraditional community was constant even when the proverbial seas were rough; she served as our lighthouse during the most challenging times and helped all of us reach shore safely. This only touches on a small portion of her character and not only what, but how she gave to so many students, parents, and staff throughout the years. Her unconditional devotion to our vision of serving our most underserved youth, regardless of the barriers students faced, her support was nothing short of inspirational. No matter the obstacle a person faced, she always believed and reiterated that, “It is well”.

Scholarship awards are contingent upon available resources.

* Only complete applications will be reviewed.
* The application deadline is July 1, 2022.
* Faxed, emailed, late and/or incomplete applications will not be considered.
* Return the completed application packet to: SMAP Department, Prince William County Public Schools, P. O. Box 389, Manassas, Virginia 20108.
* Applicant must have participated in a nontraditional program such as:
* GED
* Computer-Based Instruction (CBI)
* Independence Nontraditional School
* Juvenile Detention Center
* All applicants must graduate by August 4, 2022.

If you have any questions, please contact the Office of Student Management, 703.791.8577

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DR. RENEE H. LACEY SCHOLARSHIP APPLICATION

(Please type or print legibly in black ink.)

Last name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First name:

Middle name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip code:

Home phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell:

Date of birth:

Name of parent(s)/guardian(s):

Telephone numbers for parent(s)/guardian(s):

Are you emancipated? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you employed? \_\_\_\_\_ Yes \_\_\_\_\_ No

Place of employment:

High school(s) attended and dates:

Address and telephone number for the school from which you are graduating:

What is your goal or plan for the future and how will this scholarship benefit you?

I hereby certify that:

* All information submitted in this application is true and correct. I give the Office of Student Services permission to verify any information contained in this package, as necessary.
* I am a student intending to enroll in a Trade School, college or university’s degree or certification program.
* Any funds received from SPARK Education Foundation will be used solely for the purpose of paying for educational expenses, i.e., tuition or books.

Signature of applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

Signature of parent/guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

***(The application packet must be received in the OSMAP Office, Prince William County Public Schools, P. O. Box 389, Manassas, Virginia 20108 on or before Friday, July 1, 2022.)***