



# DRNCnfp - Daniel Stricevic and Lurena Stokes Scholarships

DuPage Residents Networking for Change – Not For Profit 501(c)(3) Organization

## Pay It Forward Community Service Scholarship Guidelines

DRNCnfp is an all-volunteer service organization whose purpose includes providing support volunteer services to local non-profit agencies/organizations and offering educational scholarships to high school seniors residing in DuPage County. Three scholarships are offered in Memory of Daniel Stricevic, Organizing Member of DRNCnfp and Lurena Stokes, Volunteer and Community Activist.

### GENERAL INFORMATION

- ◇ DRNCnfp offers three annual scholarships of \$1000 each to eligible students.
- ◇ Funds will be issued directly to student by certified check from DRNCnfp.
- ◇ Previous scholarship recipients are not eligible to re-apply until after two consecutive years.
- ◇ Relatives of DRNCnfp Board of Directors are not eligible.

### ELIGIBILITY REQUIREMENTS

- ◇ Demonstrates financial need.
- ◇ Enrollment in a Degree Program.
- ◇ Have a GPA of 2.75 or higher on a 4.0 scale (rated on a flat 4.0 scale / not a weighted 5.0 scale).
- ◇ Have completed a minimum of 12 verifiable community service hours (non-court ordered) for a non-profit organization 6-12 months prior to applying for scholarship.
- ◇ Enrolled in a minimum of 9 credit hours for the semester that the scholarship is given.
- ◇ Resident in DuPage County.
- ◇ Recipient must agree to participate in media coverage related to the scholarship award, which will include photographs to be published on social media.

### APPLICATION and ATTACHMENTS

1. A legible copy of your Financial Aid Award Letter or Student Aid Report (SAR), which must include Expected Family Contribution (EFC) amount.
2. A copy of school transcript.
3. One letter of recommendation from a non-family member.
4. One letter of recommendation from former or current academic professional on their stationery or letterhead.
5. Proof of residency (i.e. copy of photo ID. with current address and a copy of current utility bill with address as shown on photo ID).
6. Letter from non-profit verifying hours of service provided (on letterhead).

### APPLICATION PROCESS

- ◇ Send completed application with attachments in a single package by mail to: DRNCnfp PIF Community Service Scholarship; PO Box 704, Westmont, IL 60559-0704. OR by Email to: [scholarship@drncnfp.org](mailto:scholarship@drncnfp.org). Incomplete packages or packages delivered to an incorrect address will be disregarded.
- ◇ Submission deadline POSTMARKED BY: **July 31st**
- ◇ Recipients will be notified by mail before October 30th. If committee is unable to reach applicant with contact information provided in application, applicant will automatically be disqualified.
- ◇ If you have questions, please email DRNCnfp at [scholarship@drncnfp.org](mailto:scholarship@drncnfp.org) or phone 630.320.6839.
- ◇ ONLY DOC, DOX & PDF formats are acceptable attachments for email applications. **PHOTOS ARE NOT ACCEPTABLE**



# DRNCnfp - Daniel Stricevic and Lurena Stokes Scholarships

DuPage Residents Networking for Change – Not For Profit 501(c)(3) Organization

Pay It Forward Community Service Scholarship Application

## Personal Information

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

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

City & Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Email: \_\_\_\_\_

List any Academic Honors or Awards and dates earned.

Please list any volunteer programs or non-profit community service you have participated with in the past 6-12 months (*non-court ordered*). Include program name, location and total number of hours completed – use additional pages if needed:

### **Academic Information:**

Current School: \_\_\_\_\_  
Name Address

School of Enrollment in Fall Term: \_\_\_\_\_  
Name Address

In what degree program(s) are you enrolled? \_\_\_\_\_

Total number of credit hours you are enrolled this semester: \_\_\_\_\_

Current GPA: \_\_\_\_\_/\_\_\_\_\_

How did you learn about this scholarship?

\_\_\_ Facebook \_\_\_ Twitter \_\_\_ School \_\_\_ DRNCnfp website \_\_\_ Other (please specify): \_\_\_\_\_

Confirm you are *not related* to any DRNCnfp Board Member.  
By checking the box, you confirm no relation to DRNCnfp Board Members.

