

**CAMBRIA HEIGHTS DEVELOPMENT CORPORATION INC.  
JACK THOMPSON 2008 SCHOLARSHIP AWARD  
APPLICATION PACKET**



**GOAL:**

To recruit and encourage students to become more involved in community services through volunteering. Volunteering for community service helps the students to foster tolerance, to gain a sense of responsibility, to develop job skills, and to contribute to the public good as a whole. Campus Magnet High school students are the target population.

**ELIGIBILITY:**

Students who attend any of the Campus Magnet High Schools in Cambria Heights, who have met the requirements for high school graduation, been accepted to an accredited college and who have provided verification of community services performed.

**COMMUNITY SERVICE REQUIREMENTS:**

1. Parent/guardian must approve volunteer service to be performed by the student.
2. The supervisor of the agency/organization where services are rendered must submit verification of services performed by the student.
3. The student must write an essay of the community service performed during the year.
4. The student must complete and submit the scholarship application packet.

**AWARDS:**

1<sup>ST</sup> Prize \$1000, 2<sup>nd</sup> Prize \$750, 3<sup>rd</sup> Prize \$500. All award decisions are at the sole discretion of the Cambria Heights Development Corporation Inc.

**APPLICATION PACKET:**

This packet includes: application form, including description of community service, verification of community service, and letter of reference.

**APPLICATION MAILING ADDRESS:**

Jack Thompson Scholarship Committee  
Cambria Heights Development Corp Inc.  
115-68 223<sup>rd</sup> Street  
Cambria Heights, NY 11411

**APPLICATION DEADLINE:**

May 23, 2008. For further information call 718 712-4590

**Jack Thompson Scholarship Award**  
Cambria Heights Development Corp Inc.

**Application Form**

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Parents/Guardian: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

School currently attending: \_\_\_\_\_ Grade: \_\_\_\_\_

Academic honors/certificates of achievement you have received: (attach additional sheet if necessary)

\_\_\_\_\_  
\_\_\_\_\_

Extracurricular/Community service activities (attach additional sheet if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Post Secondary school/college you plan to attend: \_\_\_\_\_

Program you plan to study: \_\_\_\_\_

List acceptance letters received: \_\_\_\_\_

Signatures – indicate agreement to participate and complete application package:

Student \_\_\_\_\_ Parent/Guardian \_\_\_\_\_





**Letter of Reference**  
(Attach additional sheets if necessary)

**Student** \_\_\_\_\_

The above named student is applying for the Jack Thompson Scholarship Award. Please indicate how long and in what capacity you have known this student. Describe the student's characteristics and state why you think a Scholarship should be awarded to this student.