



The Charles Martin Touch a Life Scholarship

Dream Big. Set Goals. Commit to Achieving Them.



CHARLES MARTIN "TOUCH A LIFE" SCHOLARSHIP PROGRAM

An initiative of the African American Community Fund of the Community Foundation of St. Joseph County

The Charles Martin "Touch a Life" Scholarship was established to create a meaningful and lasting tribute to this remarkable man. The Charles Martin "Touch a Life" Scholarship helps local, academically motivated African-American students attend college through a \$2,500 annual renewable scholarship.

SELECTION CRITERIA

Students must meet the following criteria to be considered for a Charles Martin "Touch a Life" Scholarship:

- ❖ be of African American descent
- ❖ be a resident of St. Joseph County, Indiana.
- ❖ graduate from an accredited Indiana high school by June 30th of the application year.
- ❖ intend to pursue a full-time associate or baccalaureate course of study beginning in the Fall of the application year at a tax-exempt, accredited public or private college or university.
- ❖ possess a minimum cumulative GPA of 2.5 and be in good academic standing.
- ❖ demonstrate financial need.

REQUIRED DOCUMENTS

- Typewritten** application form. (Downloadable at www.cfsjc.org/scholarships/index.html)
- 1-page letter of recommendation from a person in a leadership position who knows you well (e.g. teacher, principal, guidance counselor, pastor, employer, youth worker) submitted with the application in a separate, sealed envelope, with the author's signature across the seal. Letters should not come from family members.
- Official transcript through senior year, fall semester (7th semester). Failure to provide an official transcript in the application packet will cause the application to be ineligible.
- Official copy of ACT/SAT results (results listed on your official transcript will be accepted).
- To demonstrate financial need, students must submit the Free Application for Federal Student Aid (FAFSA) and forward the subsequent Student Aid Report (SAR) or Confirmation Page indicating their Estimated Family Contribution.

APPLICATION SUBMISSION GUIDELINES

Please follow these guidelines for ease of duplication.

- ❖ **Do not staple or fold application, attachments or letter of reference.**
- ❖ Application and letter of reference must be **typewritten**.
- ❖ All materials submitted must be clean, legible copies.
- ❖ Please submit one sided copies only.
- ❖ Additional information that has not been requested will not be accepted.
- ❖ **Incomplete applications will not be considered. There will be no exceptions.**

Please submit all required documents **at one time, in one envelope**. **Complete applications** must be **received via mail or postmarked by March 1st**. Applications can be mailed to the Community Foundation at P.O. Box 837, South Bend, IN 46624 or submitted in person at 205 W. Jefferson, Suite 610 (northwest corner of Jefferson and Main in downtown South Bend). It is the responsibility of the student to ensure the application is complete and all materials are received by the Foundation on or before the postmark deadline. **Late or incomplete applications will not be considered.**

The Selection Committee will base its decision on the following criteria: GPA, SAT score, financial need, demonstrated leadership, involvement in school-related and community activities, employment history, written essays, and letter of recommendation. Finalists will be personally interviewed. **The process and applicants' status is held in strict confidence.** Questions? Contact Malissa Ayala, Program Officer, at (574) 232-0041 or malissa@cfsjc.org.



The Charles Martin Touch a Life Scholarship

Dream Big. Set Goals. Commit to Achieving Them.



CHARLES MARTIN "TOUCH A LIFE" SCHOLARSHIP PROGRAM

An initiative of the African American Community Fund of the Community Foundation of St. Joseph County

Applicant Information

Name: _____
First Last Middle Initial

High School: _____

GPA (7th semester): _____ SAT: _____ (highest math, written, and verbal) Class Rank: _____ of _____

Note: The GPA and SAT listed on this application form MUST match your transcript.

Permanent Address:

_____ Street City Zip Apt. Number

Telephone No.: _____ - _____ - _____ Date of Birth: ____/____/____ Email: _____

Family Information (Provide the following information where applicable.)

Name of father/stepfather/guardian: _____

Full Address (include city, state, zip): _____

Father/stepfather/guardian occupation: _____

Father/stepfather/guardian employer: _____

Father/stepfather/guardian level of education completed:

8th Grade High School Baccaalaureate Masters Ph.D.

Name of mother/stepmother/guardian: _____

Full Address (include city, state, zip): _____

Mother/stepmother/guardian occupation: _____

Mother/stepmother/guardian employer: _____

Mother/stepmother/guardian level of education completed:

8th Grade High School Baccaalaureate Masters Ph.D.

Please provide the number of brothers and sisters living at home and the age of each.

Number of Siblings _____ and ages _____, _____, _____, _____, _____, _____, _____.

Applicant Name: _____

College/University Information

List colleges/universities applied to **in order of preference**. Check status of acceptance.

- 1 _____ I have been accepted.
I expect notification on _____
- 2 _____ I have been accepted.
I expect notification on _____
- 3 _____ I have been accepted.
I expect notification on _____

Major area of study, program or degree you plan to pursue: _____

Scholarship Awards (please check the boxes that are applicable)

I am eligible to receive a 21st Century Scholarship

I am eligible to receive a tuition benefit based on my parent(s)/guardian(s) place of employment (please explain below the amount and length of the award)

I have been notified of other scholarship awards (please list the name and amount of each scholarship you will be receiving below)

Class Information

Are Advanced Courses/Honors Courses offered at your school during a regular school day?

Yes No

Please list all AP, IB, ACP, and Honors courses taken each year.

	Freshman	Sophomore	Junior	Senior
AP, IB, ACP Courses				
(Please label each)				

	Freshman	Sophomore	Junior	Senior
Honors Courses				

Applicant Name: _____

Work Experience (Indicate Dates of Employment, Employer, Hours Worked per Week, Nature of Work)
For those jobs where you are currently employed, please type "currently employed" in the *End* column.

Dates of Employment		Employer	Hours/ Week	Nature of Work
Begin	End			

Essays

Follow directions carefully. Please choose **two** of the questions below and attach a **typewritten** response for both questions, **not to exceed 300 words each**. Please include the essay question at the top of each response.

When completing your essays, please remember this is an important part of your application. Along with content, your ability to communicate your ideas and write clearly will be taken into consideration.

1. Charles Martin’s motto was “Touch a Life Everyday.” Describe someone who has touched your life, what they did for you, and why it mattered. Or, describe someone whose life you have touched, what you did for them, and why it mattered.
2. Describe a special attribute, quality, or skill that you have? How did you develop this attribute?
3. What was the most difficult time in your life, and why? How did your perspective on life change as a result of the difficulty?
4. In your opinion, what is the greatest challenge that your generation will face? What ideas do you have for dealing with this issue?

Additional Information

Indicate below any additional information or special circumstances which you believe should be considered by the Selection Committee. Please limit your response to the space provided.

Applicant Name: _____

Activities

Please identify activities, including years of participation and leadership under the most appropriate category. If additional pages are needed, blank forms are available at www.cfjsc.org. **Please do not abbreviate.**

	Check Years Involved					
	Fr.	So.	Jr.	Sr.		
Awards, Honors, Special Recognition	Fr.	So.	Jr.	Sr.	Brief description, if necessary.	
Community Activities (Scouts, Church, Synagogue, etc.)	Fr.	So.	Jr.	Sr.	Average Number of Hours/Year	Leadership Positions
Volunteer Community Service (LOGAN, Center for the Homeless, etc.)	Fr.	So.	Jr.	Sr.	Average Number of Hours/Year	Leadership Positions
Student Government	Fr.	So.	Jr.	Sr.	Average Number of Hours/Year	Leadership Positions

Applicant Name: _____

	Check Years Involved					
Athletics	Fr.	So.	Jr.	Sr.	Average Number of Hours/Year	Leadership Positions
Clubs (Please list the full club name)	Fr.	So.	Jr.	Sr.	Average Number of Hours/Year	Leadership Positions
Demonstrated Leadership or Special Talent not Previously Listed	Fr.	So.	Jr.	Sr.	Average Number of Hours/Year	Leadership Positions

Applicant Name: _____

Acceptance of responsibility Scholarship Program:

1. "If I receive this scholarship, it is my intent to pursue two or four years of undergraduate study on a full-time basis leading to an associate or baccalaureate degree at an accredited college or university."
2. "To assist with the processing of my scholarship payments each semester, I will forward immediately to the Community Foundation of St. Joseph County all invoices received for tuition and any eligible fees that may be covered by my scholarship."
3. "I will keep the Community Foundation of St. Joseph County apprised annually by June 1st of my enrollment and academic status during college, by completing and returning any surveys or forms as may be provided by the Community Foundation."
4. "I understand that to renew this scholarship, I must remain in good academic standing, achieve a cumulative G.P.A. of at least 2.5 (4.0 scale), and make satisfactory progress toward my intended degree."

Student Signature

Date

Please indicate how you heard about this scholarship (i.e. school newspaper, teacher, counselor, South Bend Tribune, etc.):



The Charles Martin Touch a Life Scholarship

Dream Big. Set Goals. Commit to Achieving Them.



CHARLES MARTIN “TOUCH A LIFE” SCHOLARSHIP PROGRAM

An initiative of the African American Community Fund of the Community Foundation of St. Joseph County

Letter of Recommendation

You have been asked to submit a letter of recommendation for _____.
This student has applied for a Charles Martin “Touch a Life” Scholarship. Selection will be based, in part, on factors such as academic performance, leadership, community service, involvement in extra-curricular activities, employment, and financial need. Please comment on your personal knowledge of this student’s achievements, character, and potential, and why you believe this student should be selected as a Charles Martin Scholar. **Please submit your typewritten letter with this cover page.**

- Please provide a 1-page typewritten letter of recommendation with this cover page attached.
- Place letter in a sealed envelope with your signature across the seal to ensure confidentiality. Please do not staple letters.
- Letters of recommendation must be included in the student’s application packet and either received or postmarked March 1st. Letters not included in the student’s application packet will cause the student to be ineligible for consideration.

Letter of Recommendation for: _____
Student Name

By: _____

Address: _____

Phone: _____

How long have you known student and in what context (please note letters of recommendation may not be submitted by family members)? _____
