

ACCE MENTORING SCHOLARSHIP APPLICATION 2025

Application Deadline is Tuesday, April 1, 2025

This application must be accompanied by:

- 1) Two references adults at school (teacher, counselor, or coach) who know you best and can speak to your interest in continuing your education and your desire for mentoring
- 2) Official high school transcript
- 3) Two-part essay (approximately 100 words each part) describing: a) a challenge you have faced and how you handled it and b) your main strength and weakness and how you think mentoring will help you

Please note that it is important to submit all required information since missing data may be an obstacle to selection.

ABOUT ACCE MENTORING

The single most important and unique element of ACCE's approach to continuing education is to provide mentoring for recipients of our scholarships. We know that research confirms the powerful positive impact of quality mentoring relationships on young people as they pursue their goals, and we take seriously the opportunity to be part of their journey. We guarantee our ACCE students will receive guidance, coaching and encouragement during the entire term of their scholarship through personal relationships with mentors who meet with them regularly. Those mentor meetings include non-judgmental discussion of goals, progress, and challenges in a safe, positive environment based on each student's individual situation and experience. Mentors understand that their role is not to solve a student's problems but to use their experience, insight, and expertise to ask questions and offer suggestions and coaching to help students learn and move forward independently. Our mentors are committed to the student's successful navigation of the high school to college transition and to ongoing growth, development, and academic success. ACCE students matter to us and we care about them.

PERSONAL

Name	
Address	
Date of birth	
Cell phone (calling and texting)	
Personal email	
High School	

EDUCATION GOALS

Academic Progra	am or Major (if decided)	
Work or career o	objective after finishing college	
FAMILY		
Parent(s) or Gua	rdian(s) name	
Parent(s) or Gua	rdian(s) Address	
Parent(s) or Gua	rdian occupation(s)	
# of siblings (bro	thers and sisters)	
Family members college	who attended or are attending	
Describe any reg	rular responsibilities you have ly	
FINANCIAL		
Have you comple	eted a FAFSA or MAFSA applicat	ion? FAFSAYes No MAFSAYesNO
•	I/or your family will contribute t ge each semester?	0
	sources of money are you relyi	ng
on to pay for un	expected expenses?	
Will you be work	king while attending college?	
How many hours	s per week do you plan to work	
	ND COMMUNITY ACTIVITIES	(Teams, Committees, Leadership positions, Recognition received)
Year		
From - To	Your Role / Responsibility	List of Your Activities

Year		
From - To	Your Role / Responsibility	List of Your Activities

STUDENT EMPLOYMENT HISTORY (Employers, Dates, Positions, Hours per week)

Dates From - To	# of Hours Per Week	Employer	Position /Title

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Please describe any special personal or financial circumstances you would like the committee to consider.		

Applications will be received and reviewed by the ACCE scholarship committee. Students identified as possible scholarship recipients will be interviewed by ACCE members. A final decision will be made by the ACCE scholarship committee.

Scholarship funds are sent to directly from ACCE to Cape Cod Community College in payment for classes in which a student has registered; <u>no funds are sent to students</u>.

Two-part essay (approximately 100 words each part). Please attach Word processed sheet. A). Describe a challenge you have faced and how you handled it.

escribe your main strengths and weaknesses and now do you think mentoring will help you.	

Teacher / Guidance Counselor Recommendations

1) Two references - adults at school (teacher, counselor, or coach) who know you best and can speak to your interest in continuing your education and your desire for mentoring. (Please attach Word processed sheets)

Teacher Name / Title	
Email Address	Phone Number:
School	
School Address	
<u> </u>	
Teacher Recommendation:	

Teacher / Guidance Counselor Recommendations

1)	Two references - adults at school (teacher, counselor, or coach) who know you best and can speak to your
	interest in continuing your education and your desire for mentoring, (Please attach Word processed sheets).

Teacher Name / Title	
Email Address	Phone Number:
School	
School Address	
1	1
Teacher Recommendation:	