Ouc in Counseling (4)20/20

The Camilla G. Belser Memorial Scholarship Fund



About our friend and colleague, Cammy Belser

Cammy Belser was one of the founding members of the Long Island Insurance Community (LIIC) and from its inception until her untimely passing; she served as the inspirational leader of the organization.

The Long Island Insurance Community Board, members and United Way of Long Island continue to honor the legacy of our beloved colleague.

In memory of Cammy, and her commitment to education and the insurance industry, The Long Island Insurance Community established the Camilla G. Belser Memorial Scholarship Fund through United Way of Long Island in her honor.

The program offers up to \$5,000 spread over 2 years to a student who will be attending Nassau or Suffolk Community College. We will consider other accredited two-year colleges.

Applicants must submit all the application materials together no later than April 27, 2020 to be considered for the scholarship for the 2020 – 2021 academic year. Candidates must submit an essay, a resume, two letters of recommendation and all other items listed below with their application.

Applicants must meet the following criteria:

- Applicant must be a graduating high school senior residing in Nassau or Suffolk County
- Applicant must have been accepted to Nassau or Suffolk Community College (Other accredited two-year colleges will be considered.)
- Applicant must demonstrate financial need; a copy of your FAFSA Student Aid Report (SAR) and parent/guardian's most recent 1040 (first 2 pages only) must be submitted with the application
- Applicant must be available for an interview with the Program Chairperson if deemed necessary

Application Checklist

Have you included?

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•	Completed Application Page
•	Copy of FAFSA Student Aid Report (SAR) and parent/guardian's most recent tax return (first 2 pages only)
•	Copy of SAT and/or ACT Scores
•	Copy of college acceptance letter (if available)
•	Copy of student's resume
•	Student's essay/personal statement
•	Copy of student's High School Transcript or GED with scores
•	Two letters of recommendation

(Note to Guidance Counselors —Please provide transcript & recommendation letters to students to be mailed with all other materials - DO NOT SEND SEPARATELY)

Your application is only considered complete and valid when all items listed are mailed together in one envelope.

All applications must be sent via Mail and received in the United Way offices by Monday, April 27, 2020. Mail to:

The Camilla G. Belser Memorial Scholarship Fund

Attn: Trish Rivers
United Way of Long Island
819 Grand Blvd.
Deer Park, New York 11729





The Camilla G. Belser Memorial Scholarship Fund



Scholarship Application: Applicant Data



Applicant's Name:		_ Age:	Date of Birth:	INA / DD / VVVV		
Gender: Male / Female Circle one	Does Family own home: Yes		Veteran in Household:			
Applicant's Mailing Address:	treet Address	City	State	Zip Code		
Applicant's Home Phone:	Applica	nt's Cell:				
Applicant's Email Address:						
High School Guidance Counselor Name:						
High School Guidance Counselor Email:						
School /Program applicant will be attending (Please include admission letters and/or materials on program if available)						
Education	(Flease include autilissic	ni letters (and/or materials on prog	grann in avanabie;		
Name of High School Attended:Graduation Year						
Did you graduate? (Please circle) If you withdrew from High School (If yes, please attach a copy of the	, do you have a GED (Please circle) e GED Certificate to this application)	Yes Yes	No No			
Personal Statement In an approximately 250-word essay (one type-written page), write a personal statement about a skill, talent, challenge, or opportunity that you think sets you apart from others?						
Letters of Recommendation Please provide two letters of recommendation: one from a school counselor or teacher and the other from a church, community leader or other who can attest to your involvement with community service activities at school, church or in the Long Island Community.						
Applicant and Parent/Guar	dian Disclosure					
attest that all of the information provided in this application is complete, factually correct and honestly presented. I understand that if any of the information is found to be false, this may result in disqualification or forfeiture of the scholarship award. I understand that it is my responsibility to submit appropriate bills and grades each semester to United Way of Long Island for payment that will be made directly to the appropriate academic institution or vendor. I understand that my signature below attests to the above, and I agree to adhere to these terms. If the applicant is under the age of 18 years old, an additional signature of a parent or guardian is required.						
Applicant Signature and Date	Pare	nt or Guar	dian Signature and Date			