The Christine Cordey Scholarship provides financial support for a Rockland, Orange or Westchester student entering, or currently enrolled in, a cosmetology program. Each year a $5,000.00 scholarship will be awarded to a promising Rockland, Orange or Westchester County student in need of financial aid, to assist with costs in attending the cosmetology school of his or her choice.

To be considered for the Christine Cordey Scholarship, applicants must be residents of Rockland, Orange or Westchester County and high school graduates as of June 2020. Awarding of the Scholarship is contingent on several criteria including enrollment in a licensed cosmetology program, a complete application, and evidence of financial need. Scholarship recipients are expected to use their resources wisely and uphold a high standard of conduct. Students of all ages are encouraged to apply.

The Christine Cordey Scholarship award is an outright grant. Although recipients are under no obligation to make repayment, it is hoped that once graduated and engaged in a productive career they will help honor the spirit of the scholarship by either donating to the scholarship fund, or giving back to their community in some tangible way.

How to Apply:
The Rockland Community Foundation utilizes an online application process. Applications can either be completed using the fillable pdf format, or printed out, completed, and then scanned. ALL required attachments, except letter of recommendation, must be submitted at the same time your application is submitted. DO NOT send materials separately. Only those applications filed online will be given consideration.

Your complete application, including all attachments, can be submitted electronically once opened in Adobe or be sent via email to RCFscholarships@gmail.com with your name and the name of the scholarship in the Subject line. Deadline for filing is May 1, 2020. Letters of recommendation must be sent by mail and postmarked no later than May 1, 2020. Incomplete or late applications will not be considered.

Your application will be reviewed by a committee comprised of members of the Rockland Community Foundation and the scholarship fund holder. Finalists may be contacted for an interview. Applicants will be notified by email of any scholarship award or denial on or before June 1, 2020.

Application Requirements:
- Completed application – emailed with required attachments by May 1, 2020
- Copy of your high school diploma or final transcript
- Approximately 300 typed words detailing why you have chosen to attend cosmetology school – tell us your story!
- Parent(s)/legal guardian(s) most recent tax return (first two pages only-IRS form 1040) or your 1040 if you are no longer a dependent.
- One letter of reference. Letter should be mailed directly to:

  Rockland Community Foundation
  Christine Cordey Scholarship
  P.O. Box 323
  New City, NY 10956

  Remember! Keep a copy of your application for your records.

Questions? Call 845-947-2868 or email RCFscholarships@gmail.com

Christine Cordey Scholarship 2020/2021
APPLICATION

Name: ______________________________________
Address: ____________________________________________________________________________
Email: ___________________________ Cell Phone: ___________________________
High School: _____________________ Graduation date: _______________________
Cosmetology school attending ________________________________________________

RESOURCES

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Loans

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TOTAL RESOURCES

Anticipated Expenses

Tuition

Fees, supplies, etc.

TOTAL EXPENSES

LESS RESOURCES

ESTIMATED SHORTFALL
Certification and Permissions
Please Read and Sign

I hereby affirm that the information contained herein is true and correct. I hereby grant permission to the Rockland Community Foundation to verify such information and to release information to the fund holder for the Christine Cordey Scholarship.

I understand that receipt of this scholarship grant is contingent on several criteria including enrollment in either a licensed cosmetology program or school leading to a career in the field, a complete application, and evidence of financial need. Falsification of any information or failure to meet these requirements will result in the termination of my scholarship and I will be obligated to return any grant monies already received.

I hereby grant and assign the Rockland Community Foundation the right to use my biographical information and image to publicize my nomination and/or receipt of this scholarship award for editorial, trade, advertising or any other purpose and in any manner and medium.

Student’s Signature:_____________________________ Date:________________

Parent/Guardian Signature ______________________________ Date:________________
(if applicable):