



## 2026 Inclusion Scholarship

*(All items must be completed before submission)*

- Completed Application
- Two (2) Letters of Recommendation
- High School Transcript
- One-page Essay: *Why You Deserve This Scholarship*
- Resume
- College Acceptance Letter
- Counselor Signature (IEP/504 Plan)

**Submission Deadline:**

Email all completed applications to [gratefulhandsincorporated@gmail.com](mailto:gratefulhandsincorporated@gmail.com)  
**No later than 5:00 PM on Friday April 17<sup>th</sup>, 2026**

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### Applicant Information

**Full Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

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

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

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### Secondary Contact

**Full Name:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_

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

**Phone:** \_\_\_\_\_



*Grateful Hands, Inc.*

**Email:** \_\_\_\_\_

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## High School Information

**High School Name:** \_\_\_\_\_

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

**Attendance Dates:** From \_\_\_\_\_ To \_\_\_\_\_

**GPA:** \_\_\_\_\_

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## IEP / 504 Plan

Yes

**Counselor Name:** \_\_\_\_\_

**Counselor Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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## Postsecondary Education

**College/University:** \_\_\_\_\_

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

**Intended Major:** \_\_\_\_\_

**Degree Type Sought:** \_\_\_\_\_

**Intended Graduation Year:** \_\_\_\_\_

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## Volunteer / Community Service Experience

*(Attach additional pages if needed)*

### Organization 1

**Company Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_



*Grateful Hands, Inc.*

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

Supervisor: \_\_\_\_\_

Position: \_\_\_\_\_

Dates: From \_\_\_\_\_ To \_\_\_\_\_

Responsibilities:

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**Organization 2**

Company Name: \_\_\_\_\_

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

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

Supervisor: \_\_\_\_\_

Position: \_\_\_\_\_

Dates: From \_\_\_\_\_ To \_\_\_\_\_

Responsibilities:

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**Organization 3**

Company Name: \_\_\_\_\_

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

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

Supervisor: \_\_\_\_\_

Position: \_\_\_\_\_

Dates: From \_\_\_\_\_ To \_\_\_\_\_

Responsibilities:

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**Financial Need Statement**

Please describe your financial need and explain how this scholarship would benefit you and your family.

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## Certification and Signature

I certify that all information provided is accurate and complete to the best of my knowledge.

I understand that scholarship funds will not be released until my **Fall 2026 college schedule** is submitted to the organization.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_