

2026 scholarship application

The AWC Center for Quality Communities (CQC) offers scholarships to graduating high school students. Student applications must be submitted to their respective city. City nominations must be submitted through the AWC Center for Quality Communities website at cfqc.org no later than **January 26, 2026**.

Note: Application can be saved and completed as a fillable PDF.

1	First name: _____ Last name: _____ Pronouns: _____		
2	Mailing address Street/P.O. Box: _____ City: _____ State: _____ Zip: _____		
3	Best phone number to reach you: _____ Email: _____		
4	Current high school: _____ If home-schooled, please check box: ☐ If GED, please indicate date received or expected: _____	Number of years attended _____	
5	Have you been accepted into an accredited post-secondary program or college for the 2026-27 school year? ☐ Yes ☐ No If yes, please provide institution name(s): _____ If not, please indicate the name of the institution(s) you are applying to: _____ Proof of student enrollment from the school is required prior to the release of funds.		
6	Career goals (please be specific): 		
7	Contact information of parent(s) or legal guardian(s) Name(s): _____ Address: _____ City: _____ State: _____ Zip: _____ Primary phone: _____ Email address: _____		

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Please describe your financial need. Include any financial aid you expect to receive and/or any circumstances that would help the committee understand your financial situation.

9

List your city, community, and civic involvement activities. **(No additional materials will be accepted.)**

10

List your school involvement and any academic honors and awards. **(No additional materials will be accepted.)**

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Personal essay

Write a concise essay in response to the following question. Please limit the length to 700 words or less.

Good leaders can guide and help others through both good and challenging times. This requires high standards of responsibility, empathy, and cooperation. Share a leadership experience you've had in serving your community, school, or family that has helped you understand the perspectives, motivations, and desires of people different from you. How has this experience, along with your civics education, helped you become a more effective leader?

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Statement of accuracy

- ☐ I hereby affirm that all of the information provided above is true and correct to the best of my knowledge.
- ☐ I agree that the scholarship funds will be sent directly to the educational institution.
- ☐ I agree that if I don't use the funds awarded to me by May 31, 2027, they will be returned to the scholarship fund.
- ☐ I understand that if chosen as a scholarship recipient, I must provide evidence of enrollment/registration at an accredited post-secondary institution of my choice before scholarship funds can be awarded.

Signature of scholarship applicant: _____ **Date:** _____

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Release and consent

The purpose of this form is to request permission to share your scholarship application with requesting Washington state academic institutions for the purpose of determining eligibility for other scholarship opportunities, and if selected as a scholarship recipient, to use your photo/image and name in our scholarship program materials, website, and/or social media as part of the AWC Center for Quality Communities.

If you or your parent or guardian wish to rescind this agreement and remove your information or photo, you may do so at any time by notifying the AWC Center for Quality Communities at cqc@awcnet.org. Such rescission will take effect upon receipt by the AWC Communications department.

Nothing herein shall constitute any obligation on the part of the AWC Center for Quality Communities to make any use of any of the materials or rights granted.

Use of photo/image and name**Initials**

If selected as a scholarship recipient, I grant permission for my (or my child's) photo/image and name to be used in connection with the AWC Center for Quality Communities scholarship program materials, website, and/or social media, including any and all uses of video and any portraits, still pictures, or other photographic reproductions and sound recordings in which I (or my child) may be portrayed.

Share information with academic institutions**Initials**

I grant permission for my (or my child's) scholarship application to be shared with requesting Washington state academic institutions for the purpose of determining eligibility for other scholarship opportunities.

I hereby grant permission and execute this release as of the date and year below.

Signature

Signature of parent or guardian
(required for minors under 18 years of age)

Printed name

Relationship to minor

Date

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Applicant checklist (Send completed application packet to city for consideration):

- ☐ Complete sections 1-14
- ☐ Sign sections 12-13
- ☐ Attach a letter of recommendation

Note:

Must be in good academic standing.
Must be eligible to graduate spring/summer 2026.