

ROBERT C. BYRD HONORS SCHOLARSHIP GRANT PROGRAM

2010-2011

Board of Governors for Higher Education

(860)947-1855; FAX: (860)947-1314

Department of Higher Education, State of Connecticut

E-Mail: byrd@ctdhe.org

61 Woodland Street, Hartford, Connecticut 06105-2326

www.ctdhe.org

HIGH SCHOOL STUDENT PROGRAM INFORMATION

The U.S. Department of Education has announced that scholarships will be available under the Robert C. Byrd Honors Scholarship Program for 2010-2011. The purpose of this program is to promote student excellence and achievement and to recognize exceptionally able students who show promise of continued excellence. Byrd Scholarships will be awarded to selected high school seniors for full-time study at colleges located in the United States.

Selection

This program is highly competitive. Each applicant is assigned a composite score based upon high school rank in class and SAT or ACT scores. Rank in class has a value double the value of SAT or ACT scores. Applicants with the highest composite score in each county of the State are selected for scholarships.

If selected for a scholarship, the recipient may take the scholarship to any accredited college in the United States.

Grant Amounts for 2010-2011

Grant amounts for 2010-2011 are anticipated to be \$1,500, the same as they were for 2009-2010. Awards are renewable contingent upon federal funding. Award amounts may be adjusted if the recipient is receiving other federal aid and if the total aid exceeds the annual cost of attendance. If a scholarship recipient has already been tendered a college financial aid package which includes a federal loan and if the college must adjust the aid package because of this scholarship, the portion of the aid package which must initially be reduced is the federal loan.

Eligibility Requirements

An applicant must:

1. be a legal resident of Connecticut;
2. be a U.S. citizen or a permanent resident alien, or a national, or be in the process of applying to be a U.S. citizen;
3. receive a secondary school diploma in June 2010, and;
4. rank in the top 2 percent of his or her JUNIOR year class, **OR** have a combined score of 2100 or better on the Scholastic Aptitude Test (SAT), or a composite score of 32 or better on the ACT;
5. have applied or been accepted for enrollment to any accredited college in the United States;
6. submit a completed application form by April 1, 2010 to the **Robert C. Byrd Honors Scholarship Program, c/o the Connecticut Department of Higher Education, 61 Woodland Street, Hartford, CT 06105-2326.**

Award Notification

All 2010-2011 applicants will receive written notification prior to July 1st concerning the status of their application.

Award Disbursement

Awards are sent directly to colleges for credit to the student's account. Half of the award is sent in the fall after the college confirms a student's eligibility. The balance is sent to the college in the spring following enrollment confirmation.

The Connecticut Department of Higher Education does not discriminate on the basis of race, religion, color, national origin, age, gender, disability or sexual orientation in its programs or activities. Inquiries concerning the application of nondiscrimination policies may be made to the Department of Higher Education.

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APPLICATION

Please type, or print in ink, all information except signatures.

1. Complete and sign Section A.
2. Ask your HIGH SCHOOL PRINCIPAL or GUIDANCE COUNSELOR to complete Section B. It is the applicant's responsibility to ensure that the appropriate school official completes this section and forwards it to the Robert C. Byrd Honors Scholarship Program, c/o the Connecticut Department of

Higher Education. **IMPORTANT:** A completed application form must be received by April 1, 2010.

3. Additional Documentation: once the selection process has been completed, scholarship recipients will be required to submit a copy of their college admission letter to the Department of Higher Education.

NOTE: Disclosure of the applicant's Social Security Number (SSN) is requested in the application for the Robert C. Byrd Honors Scholarship Program. It will be used to verify the identity of applicant and to record necessary data.

SECTION A — TO BE COMPLETED AND SIGNED BY THE STUDENT

SOCIAL SECURITY NO.		NAME		DATE OF BIRTH (Use numbers)			
		Last Name	First Name	MI	Mo.	Day	Year
						19	
PERMANENT HOME MAILING ADDRESS							ZIP CODE
Number and Street			City		State	CT	
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Home Telephone (____)		E-Mail _____				

Check ALL statements:

I am a Connecticut resident.

Yes No

I am a U.S. citizen or permanent resident alien with a valid 1-151 Card.

Yes No

I am in the process of applying to be a U.S. citizen.

Yes No

(If yes, please forward a copy of your citizenship application with his form)

For Statistical Purposes Only: Please list

Applicant's First Choice College _____

Applicant's Second Choice College _____

I have reviewed the eligibility requirements for this program and verify the information above. I hereby authorize the guidance office at my high school to release the information requested below.

APPLICANT'S SIGNATURE

X _____

DATE

Mo. Day Yr.

SECTION B — TO BE COMPLETED AND SIGNED BY THE GUIDANCE COUNSELOR

PLEASE ANSWER ALL QUESTIONS

Is the applicant a high school senior whose anticipated graduation date is June 2010? Yes No

SECONDARY SCHOOL
(Code. No.)

If **yes**, list the applicant's cumulative class rank at the end of his or her **JUNIOR** year. _____ Class Rank _____ Junior Class Size

Report applicant's SAT or ACT score:

List applicant's highest SAT scores taken on any ONE test date:

SAT's Taken on Test Date of: _____

____ SAT Critical Reading ____ SAT Math ____ SAT Writing

Report applicant's highest ACT scores taken on any ONE test date:

ACT's Taken on Test Date of: _____

Composite ACT Score: _____

NAME _____ SIGNATURE _____ DATE _____
(Guidance Counselor) (Please Print)

TITLE _____ SECONDARY SCHOOL NAME _____

SCHOOL ADDRESS _____ TELEPHONE NO. _____

GUIDANCE COUNSELOR E-MAIL ADDRESS _____ FAX _____