

The Kevin O'Boyle Scholarship Fund was formed in 2020, after the untimely passing of Child and Family Advocates of Cuyahoga County (CFACC) board member and Court Appointed Special Advocate (CASA) volunteer Kevin O'Boyle. A Cleveland native, Ignatius High School graduate, and retired UPS professional, Kevin effectively supported dozens of foster youth through his service as a CASA in Cleveland and Chicago. He also supported CASA at the board level, serving as Chair of CFACC's Development Committee and Chairperson of the Ohio CASA state board. We are pleased to honor Kevin's legacy and all he did during his 20+ years as a CASA volunteer by helping local college or vocational-school bound former foster youth continue their education and training in preparation for an independent and stable adulthood.



**Our Mission** is to improve the lives of children and families involved in the juvenile justice, child welfare, and family law systems through service as Court Appointed Special Advocates (CASA); education, training, advocacy, and practice and policy development; and collaborative alliances with related organizations.

## SCHOLARSHIP CRITERIA:

**NOTE: Scholarship funds will be awarded to the student upon evidence of registration in an accredited higher educational institution.**

- Available awards range from \$500-\$1,500 per student per year.
- Awards are to cover qualified educational expenses as documented by the student's advisor or school including tuition, fees, books, internet access, computer, room and board, and childcare.
- If awarded, funds will be paid directly to the student's school, vocational or training program, landlord or childcare provider after verifying satisfactory academic progress, and not directly to the student.
- Awarded students must consent to allow Child and Family Advocates of Cuyahoga County (CFACC) to include their name, picture and a description of their enrolled program in CFACC communications related to the Kevin O'Boyle Scholarship Fund.



 **Mission** To make a difference for every child served through advocacy, education, and collaborative alliances.  
 **Vision** Every child is seen, heard, and engaged, leading to permanency and hope.



# SCHOLARSHIP APPLICATION PACKET

## ELIGIBILITY REQUIREMENTS:

To be considered for the "Kevin O'Boyle Scholarship", applicants must reside or have graduated from a high school or obtained a GED equivalent within the Child and Family Advocates of Cuyahoga County's service area, and demonstrated foster care system history of at least one year; verification from Cuyahoga County Division of Children and Family Services (CCDCFS) will be required.

- Demonstrated financial need as indicated by your Federal Application for Federal Student Aid (FAFSA), and a qualified recommendation from a Financial Aid Officer, School or Program Advisor.
- Currently enrolled college or vocational students with a satisfactory GPA of 2.5 and at least 50% degree, program, or certificate completion.

**Graduating high school seniors are not currently eligible for this award.**

*Funds awarded are made to, or on behalf of the eligible recipient for qualified educational and related purposes. Your scholarship may or may not be taxable. Please consult a financial aid advisor or a tax preparer for guidance.*

## TO APPLY:

**NOTE: An application is not considered received unless all questions are answered completely, and materials listed are received.**

1. Read all instructions completely and thoroughly.
2. Fill out the application and submit the following supporting documents (documents must be unstapled and unbound, paper clips preferred).
3. Present your information neatly and accurately.
4. Check that you have provided the following:

Scholarship Application

Documentation of Citizenship Status (Birth Certificate, U.S. Passport)

Official Copy of College or Program Transcripts


Financial Aid Award Letter from Institution or Program

Two (2) Written Recommendation Letters

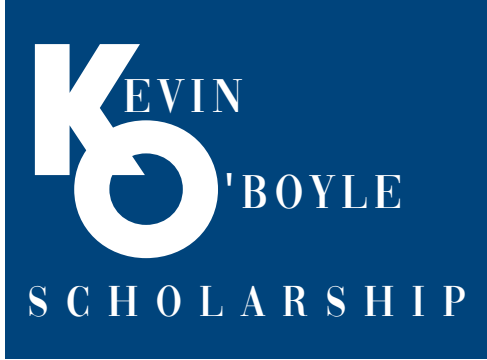
*We require that one be a teacher or advisor at your school or program, persons not related to you. Please provide their contact information on page six, and an email will be sent with the recommendation form to be completed.*

Foster Care Verification Letter from Cuyahoga County Division of Children and Family Services (CCDCFS)



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# SCHOLARSHIP APPLICATION PACKET

## SUBMISSION OPTIONS:

### Mail:



Kevin O'Boyle Scholarship  
Child and Family Advocates of Cuyahoga County  
12200 Fairhill Road, Suite E193  
Cleveland, OH 44120

### Fax:



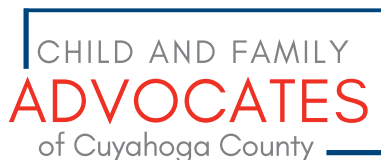
Kevin O'Boyle Scholarship  
Child and Family Advocates of Cuyahoga County  
Fax Number: (216) 301-2640

### Scan and Email:



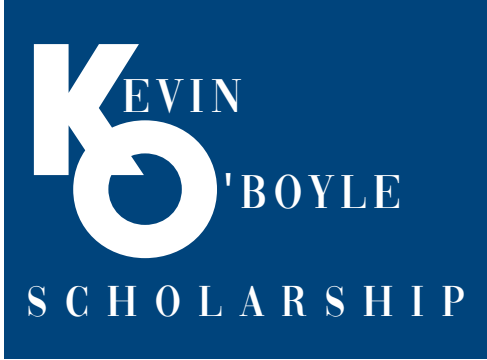
Kevin O'Boyle Scholarship  
Child and Family Advocates of Cuyahoga County  
Email Address: [info@cfadvocates.org](mailto:info@cfadvocates.org)

Child and Family Advocates of Cuyahoga County (CFACC) is committed to equal opportunity in employment and education. CFACC does not discriminate in any program or activity on the basis of race, color, religion, gender, age, national origin, disability, marital status, or any other protected class.



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**SCHOLARSHIP APPLICATION**

Read and follow the instructions carefully prior to submitting your application.

If your application is selected for review, you will be asked for documentation to support the information you provided. Likewise, all correspondence and award agreements will be generated from the personal information submitted.

**PERSONAL INFORMATION**

Tell us about yourself

<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name	First Name	Middle Name

  
Street Address  
Street Address 2

<input type="text"/>	<input type="text"/>	<input type="text"/>
City	State/Province	Postal/Zip Code

<input type="text"/>	Citizenship Status:	<input type="checkbox"/>	Citizen	<input type="checkbox"/>	Non-Citizen	<input type="checkbox"/>	Resident Alien
Date of Birth	Document Number:	<input type="text"/>					

*Applicants must provide documentation of citizenship status. Non-citizens and foreign nationals are eligible for scholarship awards based on results of required federal database search(es).*

<input type="text"/>	<input type="text"/>
Primary Phone Number	Email Address

Number of years in the foster care system (Cuyahoga County):

Do you have a relationship with anyone affiliated with the Kevin O'Boyle family or Scholarship Committee?

Yes     No

If yes, please provide their name(s):

<input type="text"/>	<input type="text"/>
Parent/Guardian Name, If Under 18	Phone Number

<input type="text"/>	<input type="text"/>
Parent/Guardian Name, If Under 18	Phone Number



# SCHOLARSHIP

## SCHOLARSHIP APPLICATION

Read and follow the instructions carefully prior to submitting your application.

### OPTIONAL INFORMATION

Information regarding gender, ethnic origin and race are optional. The information is requested for post-scholarship report generation only and in no way affects your selection for college scholarship awards. However, providing this information may increase your opportunities for scholarships where donors have asked that priority consideration be given to students meeting certain demographic criteria (such as minority status, parent's place of employment, area of study, etc.)

Gender Identity:  Male  Female  Other: \_\_\_\_\_

Ethnic Origin:  Hispanic  Non-Hispanic  Not Indicated

Race (Choose one or more):  White  Black or African American

Asian  American Indian or Alaskan Native, Hawaiian or Other Pacific Islander

Please check veteran status (Check all that apply):

- Veteran
- Child of a Veteran
- Grandchild of a Veteran
- None of the Above

Status at the time of application:

- I will graduate in May 20\_\_
- I will be an incoming freshman graduating high school prior to 20\_\_
- I have attended college but have less than 32 college credit hours
- I have attended college but have at least 32 or more college credit hours
- I am a GED graduate with no college credit hours

Are you now or will you be a first generation college student?

- Yes, I am the first, neither of my parents or grandparents have attended.
- No, one or more of my parents or grandparents have attended college.
- I don't know



# SCHOLARSHIP APPLICATION

Read and follow the instructions carefully prior to submitting your application.

If selected, you will be asked for documentation to support the information you provided. Likewise, all correspondence and award agreements will be generated from the personal information submitted.

## HIGH SCHOOL INFORMATION:

High School or Program Equivalency Attended

High School or Program Equivalency Address

High School or Program Equivalency City

State/Province

Postal/Zip Code

Have you completed 50% of your enrolled program, degree, or training certificate:  Yes  No

Most recent cumulative GPA:

High School or College activities, community involvement, volunteer work, honors, offices held:

By signing in the space below, you are certifying that all information is correct and that you are the person completing this application. You will receive an email confirmation that your application was received.

\_\_\_\_\_  
Signature





SCHOLARSHIP

## SCHOLARSHIP APPLICATION

Read and follow the instructions carefully prior to submitting your application.

If selected, you will be asked for documentation to support the information you provided. Likewise, all correspondence and award agreements will be generated from the personal information submitted.

### COLLEGE, TECHNICAL SCHOOL, OR VOCATIONAL PROGRAM:

Institution Name

Institution Address

Institution City

State/Province

Postal/Zip Code

Program/Degree:

Length of Program/Degree:

Semester/Term Applying For:

Admission Type:

- Full-time
- Part-time Day
- Part-time Evening
- Weekend

Session of Admission:

- Spring
- Summer
- Fall
- Post-Secondary Enrollment

Activities, groups, clubs, volunteer opportunities you may participate in:

Please describe your unmet need, and how will this scholarship will help you continue your education.



**SCHOLARSHIP APPLICATION**

Read and follow the instructions carefully prior to submitting your application.

Your essay should be 300-500 words. You should address in your essay: your career goals and choice of program, what you intend to do with your education, and why a scholarship is important to you. Include any academic and non-academic accomplishments, personal characteristics, or experiences that make you uniquely worthy of scholarship consideration.

A large rectangular area with horizontal lines for writing an essay.

By signing in the space below, you are certifying that all information is correct and that you are the person completing this application. You will receive an email confirmation that your application was received.

\_\_\_\_\_  
Signature



\_\_\_\_\_  
Date





# SCHOLARSHIP RECOMMENDATION

Read and follow the instructions carefully prior to submitting your application.

You have been asked to provide two (2) written recommendation letters. We require that one be a teacher or advisor at your school or program, persons not related to you. Please provide the names and contact information for your recommendations. A direct communication will be sent to them to complete the recommendation form.

## RECOMMENDATION 1:

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Last Name

First Name

Title

Street Address

Street Address 2

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

City

State/Province

Postal/Zip Code

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Email

Phone Number

## RECOMMENDATION 2:

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Last Name

First Name

Title

Street Address

Street Address 2

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

City

State/Province

Postal/Zip Code

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Email

Phone Number





**PROGRAM RECOMMENDATION**

Read and follow the instructions carefully prior to submitting your recommendation. *Please do not return this completed form to the scholarship applicant.*

You have been asked to submit a letter of recommendation on behalf of this applicant for the Kevin O'Boyle Scholarship. Please use this form as a guide when writing your letter of recommendation or you may simply answer these questions.

**Mail to:** Kevin O'Boyle Scholarship  
Child and Family Advocates of Cuyahoga County  
12200 Fairhill Road, Suite E193  
Cleveland, OH 44120

**Scan & Email to:** info@cfadvocates.org  
**Fax to:** (216) 301-2640

**APPLICANT'S INFORMATION:**

Last Name

First Name

Middle Name

How do you know the applicant?

Comment on the applicant's personal character and potential for future professional achievement.

What characteristics do you consider their greatest attributes?

What concerns do you have about the applicant, if any?

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Email

\_\_\_\_\_  
Daytime Phone



\_\_\_\_\_  
Date



**LETTER OF RECOMMENDATION**

Read and follow the instructions carefully prior to submitting your recommendation. *Please do not return this completed form to the scholarship applicant.*

You have been asked to submit a letter of recommendation on behalf of this applicant for the Kevin O'Boyle Scholarship. Please use this form as a guide when writing your letter of recommendation or you may simply answer these questions.

Mail to: Kevin O'Boyle Scholarship  
Child and Family Advocates of Cuyahoga County  
12200 Fairhill Road, Suite E193  
Cleveland, OH 44120

**APPLICANT'S INFORMATION:**

Last Name

First Name

Middle Name

How do you know the applicant?

Comment on the applicant's personal character and potential for future personal achievement.

What characteristics do you consider his/her greatest attributes?

What concerns do you have about the applicant, if any?

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Email

\_\_\_\_\_  
Daytime Phone



\_\_\_\_\_  
Date