James H. Parke Memorial Fund Summer Youth Scholarship Award Application

The James H. Parke Memorial Fund comprised of the Department of Veterans Affairs Voluntary Service (VAVS) National Advisory Committee (NAC) member organizations and was established in 1976 to serve as the non-profit source of funds for a VAVS Youth Scholarship. Organizations, volunteers, VA staff, and others continue to contribute to the Fund.

This award seeks to recognized outstanding students who serve **only during** <u>VA's Summer Youth Volunteer Programs</u> for their contribution and to encourage continued involvement in VAVS. Each medical center may nominate one (1) VAVS student volunteer for receipt of the award. Recommendations may be made by a VA staff member who acts as a supervisor of the student volunteer or a member of the local VAVS Committee. Discuss recommendations with the Chief Voluntary Service before submitting application to the Medical Center Director.

Learn more at http://www.volunteer.va.gov/ParkeScholarship.asp

Nominees must be in 10th grade or above and have not reached their 19th birthday by September 30th of the nomination year.

Submit completed application to:

James H. Parke Scholarship Nomination Board

Parkescholarship@amvets.org

Must be received no later than December 31st of the nomination year.

Candidate's Basic Information

Name of Candidate:		
Address:		
City, State, ZIP:		
Telephone:	Email:	
Date of Birth:	Candidate Age:	Years of Service:
Nominator's Basic Information		

Nominated By:	Title:
VA Medical Center:	Address:
City, State, ZIP:	
Telephone:	Email:

Candidate's Status

Nomination Year:	Hours this Summer:	Total Cumulative Vo	olunteer Hours:						
Supporting Organization (if	any):								
Has applicant received this	scholarship before? Yes	No							
Certifying Hours and S	Certifying Hours and Submission Date:								
VAVS/Manager:									
Signature:		Da	ate:						

Describe Areas of Service:

Scholastic Activity

School Currently Attending:

High School Year.

College Year.

Technical Year:

Major/Course of Study:

Honors and Awards:

Dependability

Rate (10 is highest):	1	2	3	4	5	6	7	8	9	10
Describe:										

Fulfillment and Acceptance of Responsibility

Rate(10 is highest):	1	2	3	4	5	6	7	8	9	10
Describe:										

Personality and Pleasantness to Patients and Staff											
Rate (10 is highest):	1	2	3	4	5	6	7	8	9	10	

Describe:

Leadership Capability		

Rate (10 is highest):	1	2	3	4	5	6	7	8	9	10
Describe:										

Inspiration to Patients Through Service Performed										
Rate (10 is highest):	1	2	3	4	5	6	7	8	9	10
Describe:										

Ap	pearance	
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Rate (10 is highest):	1	2	3	4	5	6	7	8	9	10
Describe:										

Qualifications

What qualifications does nominee possess that set him/her apart from others?

Comments from Nominee