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\$1,000 SCHOLARSHIP AWARD APPLICATION & RELEASE FORM

APPLICATION DUE DATE: September 26, 2021. Please print clearly and submit completed application with signature. If this form is incomplete, inaccurate, or not signed, it will not be considered. An essay is required with this application. Please submit a 1000 word typed essay response to the following: **"Tell us how your feeling and what you do to keep yourself motivated despite your current circumstances?"**

SCHOLARSHIP GUIDELINES

1. All awards are paid directly to the student or individual. The maximum award per student/ individual per calendar year is \$2,500.
2. Applicants must write a thank you letter to the sponsor awarding the scholarship.
3. The complete application AND release form must be sent via e-mail to icare@dsvgroupelevates.org no later than September 26, 2021.
4. Winners will be notified by October 2, 2021 and may be present at the 2021 Legacy Event as our distinguished guest.
5. Immediate family members of the DSV Group Elevates Corp., Board of directors, and scholarship committee members are not eligible to participate.

STUDENT/APPLICANT INFORMATION

Student Name:			
Mailing Address:			
Telephone		Email (if over 18):	
High School/College:		Cumulative GPA:	
Focus Area/Major:			
Prospective/Current College:			
How will this scholarship benefit your educational goals?			

PARENT/LEGAL GUARDIAN CONTACT INFORMATION

Name:			
Address:			
Telephone:		Email:	

RELEASE ACKNOWLEDGEMENT

I understand my academic information supporting this application may be requested by the scholarship selection committee and/or the scholarship donor(s). If awarded a grant, I release to DSV Group Elevates Corp., the right to use my name, story, and picture for printed and video materials, reports, and press releases, without compensation. I will attend future award ceremonies and fundraising events if requested by the DSV Group Elevates Corp. I certify that the statements above are true to the best of my knowledge and grant my permission for the information contained herein to be shared with the scholarship selection committee and scholarship donor(s). ***If student is under 18, a parent or legal guardian must also sign this acknowledgement form.**

Applicant's Signature:	
Guardian's Signature:	

CONTACT US:

6216 Marlboro Pike, Ste B
District Heights, MD 20747
Tel: 240.691.8027

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