



Connecticut Children's Kelly Syles STEM Scholarship:

Kelly Styles is the former Senior VP, Chief Information Officer at Connecticut Children's Medical Center. His passion is to support young people going into a career pursuing Science, Technology, Engineering, and Mathematics (S.T.E.M.) Kelly retired from Connecticut Children's in June 2020, and as a tribute to him, generous individuals of the Connecticut Children's Information Solutions department donated the funds to create the Kelly Styles S.T.E.M. Scholarship. *The scholarship is managed by the SINA REACH committee.*

One scholarship will be awarded to a graduating senior continuing their education in a post-secondary program related to Science Technology Engineering and Mathematics (S.T.E.M). *The amount for this year's scholarship has not been disclosed as collections are still taking place.*

Who is Eligible: Any graduating high school senior from Hartford, CT is eligible. The recipient will be chosen based on the following criteria:

- Participated in STEM-related activities
- Pursuing STEM-related programs in college
- Academic achievement
- Financial Need

How to Apply:

1. Complete the following application, answering all questions, typed or in ink.
2. Have completed a recommendation on the form provided inside the application (no relatives please).
3. Applications must be emailed, postmarked, or hand-delivered by 4:30 p.m. on **Monday, May 3, 2021.**
4. Mail to:

SINA
207 Washington Street
Hartford, CT 06106

5. Email to: Linda Torres at lvalentin@sinainc.org
6. Questions? Feel free to call Linda at (860) 493-1618 or visit www.sinainc.org/stem_scholarship.

Application Process:

A committee consisting of representatives from SINA/REACH and the Connecticut Children's IS department will review all applications. Students will be selected for personal interviews by the same committee.

Application Form

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TYPE OR PRINT (LEGIBLE)

BACKGROUND INFORMATION

Expected Graduation Date: _____

Name: _____

EMAIL ADDRESS: _____

PRIMARY MAILING ADDRESS: _____
NUMBER STREET APARTMENT

CITY STATE ZIP CODE

TELEPHONE # _____

MOTHER'S (or guardian's) NAME: _____

HOME ADDRESS (if different from yours): _____

OCCUPATION: _____

FATHER'S (or guardian's) NAME: _____

HOME ADDRESS (if different from yours): _____

OCCUPATION: _____

How many dependent children in the household (applicant included, list ages):

Number _____ Ages: _____

How many family members will be in college at least part-time this next school year (including applicant)? _____

ATTACHMENTS

Please attach the following items to this application along with your essay.

- A copy of your latest available transcript, showing classes taken and grades achieved, along with class ranking
- A copy of your Scholastic Aptitude Test (SAT) scores.
- If available, a copy of your acceptance letter and financial Award for each institution you have been accepted to.
- Feel free to attach extra pages if necessary, such as resumes, as well as documentation of special achievements, awards, or newspaper publicity.

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PARTICIPATION IN STEM ACTIVITIES/COURSES

1. List the STEM related activities you have engaged in, What responsibilities did you have, and how long did you perform them?

Activity	How Long? (Dates)	Duties

2. Write an essay, a maximum of 500 words, discussing activities or relationships in your life that led to your interest in a STEM-related field. Include some, or all of these points:

- a. Why and how did you get started?
- b. Did you relate these activities to your schoolwork?
- c. What have you learned about yourself through your involvement?
- d. How do you see these experiences impacting your future?

Essay format: 500 words, typed double space. Make sure to place your name on the paper.

Check if Essay is attached.

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FUTURE PLANS

1. Name of the institution to which you have been accepted and will attend:

2. If you have not been accepted, list the institutions to which you have applied and the status of your application.

3. What are the total annual expenses you anticipate?

Tuition: \$ _____

Room & Board: \$ _____

Books & Fees: \$ _____

Transportation: \$ _____

Other (Please explain): \$ _____

Total: \$ _____

4. Secured sources of income to cover your expenses:

Financial aid from institution: \$ _____

Scholarships (other than this one): \$ _____

Contribution by Parents: \$ _____

Savings: \$ _____

Employment: \$ _____

Student Loan: \$ _____

Total: \$ _____

7. How do you anticipate covering the difference between your expenses and income?

CERTIFICATION / PERMISSION

The undersigned hereby certify that the information provided on this application, including attachments, is true to the best of their knowledge.

Check Box if you and/or your parent/guardian, give permission to use your **story/application and interview statements** for SINA and Connecticut Children's Medical Center printed and online publications and events.

Check Box if you and/or your parent/guardian, give permission to use your **image** for SINA and Connecticut Children's Medical Center printed and online publications and events.

Student Applicant: _____ Date: _____

Parent/Guardian: _____ Date: _____

