



City of Deltona

2345 Providence Blvd.
Deltona, FL 32725

Agenda

William S. Harvey Deltona Scholarship Advisory Board

Chair Cristina Raimundo
Vice Chair Lori Burbank
Member Walter Dawson
Member Sandra Dillard
Member Johnny Inthachack
Member Steve Lightbody
Member Harry Meeks

Thursday, December 1, 2016

6:00 PM

FIRST FLOOR CONFERENCE ROOM

1. CALL TO ORDER:

2. ROLL CALL

3. APPROVAL OF MINUTES & AGENDA:

None.

4. NEW BUSINESS:

A. [Selection of Chairperson and Vice Chairperson.](#)

B. [Review, change and finalize the 2016-2017 Scholarship Selection Process and Application Package for distribution.](#)

Attachments: [2017 \(1\) Scholarship Application Packet Contents](#)
[2017 \(2\) Scholarship Eligibility Requirements Updated](#)
[2017 \(3\) Scholarship Application Checklist](#)
[2017 \(4\) Scholarship Application Form](#)

C. [Set schedule for future meetings and a timeline for the application process.](#)

D. [Review, change and finalize the Wall of Fame process and assign new nominations to a Board member.](#)

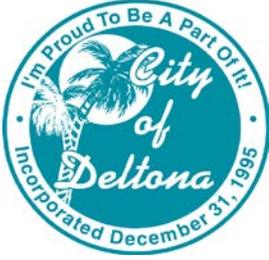
- Attachments:** [2017 \(1\) Wall of Fame Guidelines](#)
 [2017 \(2\) Wall of Fame Nomination Form](#)
 [2017 \(3\) Wall of Fame Nominee Scoring Sheet](#)
 [2017 \(4\) Wall of Fame Profile of Nominee](#)
 [2017 \(5\) Wall of Fame Recommendation Form](#)

5. PUBLIC COMMENTS:

6. ADJOURNMENT:

NOTE: If any person decides to appeal any decision made by the City Commission with respect to any matter considered at this meeting or hearing, he/she will need a record of the proceedings, and for such purpose he/she may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based (F.S. 286.0105).

Individuals with disabilities needing assistance to participate in any of these proceedings should contact the City Clerk, Joyce Raftery 48 hours in advance of the meeting date and time at (386) 878-8500.



William S. Harvey Deltona Scholarship Program 2017 Packet Contents

The City of Deltona Commission has limited the number of scholarships a student may receive to two (2). Please do not apply if you have already received two (2) scholarships from the William S. Harvey Deltona Scholarship Program. Below is a list of documents that make up the application packet. *****PAY ATTENTION TO DETAILS*****

1. Scholarship Packet Contents Form.
2. Scholarship Eligibility Requirements Form.
3. Scholarship Checklist Form.
4. Scholarship Application.

If for any reason you have not received all four (4) documents, please contact the William S. Harvey Deltona Scholarship Advisory Board Staff Liaison at 386-878-8506.

The City Commission of the City of Deltona has appointed seven (7) Deltona residents to serve on the William S. Harvey Deltona Scholarship Advisory Board. All applications must be submitted or postmarked by the due date and time selected by the Scholarship Advisory Board, listed at the bottom of this page. The Scholarship Advisory Board reviews the applications ranking them according to a predetermined ranking system.

Deltona Commission approved an award range of no more than \$3,000 and no less than \$1,000 to deserving applicants. When the Scholarship Advisory Board has made their selections, the selections are submitted to the City Commission at the next available Regular City Commission Meeting. The Regular City Commission Meetings are scheduled on the first and third Mondays of each month, unless there is a Monday holiday, at which time the meeting will usually be scheduled for the following day.

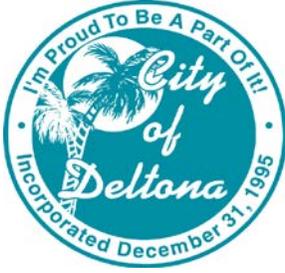
The Commission will review the Scholarship Advisory Board's selection list and either approve or deny the selections. After the Commission approves the recipient list, a letter will be sent to each recipient apprising them of the Commission's decision. Included in the letter to the award recipients will be the Scholarship Acceptance and Social Security forms which must be filled out entirely and returned to the Staff Liaison within 30 days of receipt of the award letter. The Scholarship Acceptance Form notifies the City which College/University/Trade School the applicant has selected and has been accepted to attend. If the recipient fails to return the Scholarship Acceptance and Social Security Forms within the 30 day time frame, the funds will be returned to the City of Deltona. Each award recipient will be notified of the Regular City Commission Meeting date and time that the awards will be presented by the Commission.

Submit the completed Application Packet, in the order listed on the Checklist, to the:

William S. Harvey Deltona Scholarship Advisory Board
Staff Liaison/City Clerk's Department
2345 Providence Blvd.
Deltona, FL 32725

PLEASE NOTE:

Incomplete applications will not be considered. All applications must be **postmarked by February 27, 2017,** or **Hand delivered by March 03, 2017,** no later than 5:00 pm. **If you have already received two (2) scholarships from the City of Deltona, please do not apply.**



William S. Harvey Deltona Scholarship Eligibility Requirements 2017

The City of Deltona is proud to offer financial assistance to residents who are in pursuit of an academic degree at an accredited* Florida college, University, or Trade school. Scholarships are awarded based on the applicant's financial needs, scholastic achievements, participation in academic and community organizations and programs. Please **do not** apply if you have already received two (2) scholarships from the William S. Harvey Deltona Scholarship Program. The City of Deltona Commission limited the number of scholarships each applicant may receive from the City of Deltona to two (2) scholarships at the Regular City Commission Meeting, October 22, 2007. ****PAY ATTENTION TO DETAIL. INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. ****

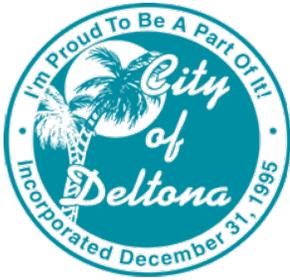
Applicant must:

- Currently reside in the City of Deltona and have maintained at least 6 months of residency within the City.
- Provide High School (*College) transcripts showing minimum grade point average of 2.0. *If attending College, please provide both High School and College transcripts.
- Provide most recent standardized test scores (e.g. PSAT, SAT, ACT, GED).
- Have applied or been accepted as a full time student at an accredited* Florida college, University or Trade school and must enroll upon graduation from high school.
- Notify the William S. Harvey Deltona Scholarship Advisory Board with a copy of a letter of intent to enroll. If a recipient fails to provide a copy of the letter of intent to the Scholarship Advisory Board, the funds will remain with the City of Deltona.
- Upon award of a scholarship, return the Scholarship Recipient and Social security forms within 30 days of award notification. Scholarship recipients who enroll at an accredited institution different from that listed on the Application and Scholarship Recipient Form, will need to notify the Scholarship Advisory Board **immediately**. Allocated funds will be transferred to the appropriate Florida institution.

Each Applicant's Scholarship funds will be mailed directly to the chosen school's Financial Aid Office. Please check with the Florida College, University or Trade school to verify the address and phone number of where the award should be sent. It is not the responsibility of the City to verify information you have submitted regarding the Florida community college, college and/or university you have selected. All unused funds must be returned to the City of Deltona Finance Department along with a copy of the Social Security Number Form and a letter informing the City of the reason for the return of funds.

**Accreditation is through the Commission on Colleges: Southern Association of Colleges and Schools: refer to <http://www.sacscoc.org/>, or ACICS Accrediting Council for Independent Colleges and Schools <http://acics.org>.*

Scholarship recipients will be selected without regard to race, age, gender, religion, political beliefs or any other factors which could be constituted unfair or illegal discrimination.



William S. Harvey Deltona Scholarship Checklist 2017

The City of Deltona is proud to offer financial assistance to our residents who are in pursuit of an academic degree at an accredited* Florida college, university or trade school. At the Regular City Commission Meeting on October 22, 2007, the City of Deltona Commission has limited the number of William S. Harvey Deltona Scholarships a student may receive to two. Please **do not** apply if you have already received two (2) William S. Harvey Deltona Scholarships from the City of Deltona. In order to process applications and ensure fairness, the William S. Harvey City of Deltona Scholarship Selection Committee asks all applicants to submit the following documentation in the order listed:

PAY ATTENTION TO DETAILS

- _____ 1. Scholarship Checklist.
- _____ 2. Copy of driver's license or State identification.
- _____ 3. Complete Scholarship Application. Incomplete applications will not be considered.
- _____ 4. Scholarship Essay, as described on page three (3) Item VI, of the Scholarship Application.
- _____ 5. Copy of most recent standardized test scores (e.g. PSAT, SAT, ACT,).
- _____ 6. Most recent official sealed high school/college transcripts, or GED scores.
- _____ 7. Applicants **must** provide one of the following for determining financial need:
 - a. Copy of the applicant's **complete Federal Student Aid Report/SAR** (FAFSA).
 - b. Copy of applicant's (if filed as an independent) **complete** Federal Income Tax Return including signature page, from most recent year, no earlier than 2015, with personal information such as Social Security number, bank account numbers and access codes redacted. (Use **white out** and not a black marker as the information imprint will show through if black marker is used.) (If 2016 taxes have been filed that is what should be provided.)
 - c. Copy of parent/guardian's **complete** Federal Income Tax Return including signature page from most recent year, no earlier than 2015, with personal information such as Social Security numbers, bank account numbers and access codes redacted. (Please use **white out** and not a black marker as the information imprint will show through if black marker is used)
- _____ 9. **Optional:** Demographic Information. (Not required for a completed application.)**

Submit the Application Packet, in the order listed on the Checklist, via mail or hand delivery to the:

William S. Harvey Deltona Scholarship Advisory Board, 2345 Providence Blvd., Deltona, FL 32725.

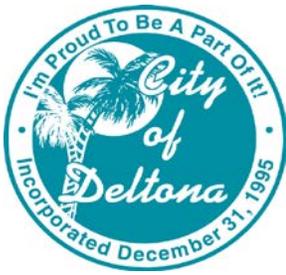
All applications must be postmarked by February 27, 2017 or received via hand delivery by March 3, 2017 no later than **5:00 pm**. For any questions, please contact the Staff Liaison at **386-878-8506**.

Applicant Name (Print):

*Accreditation is through the Commission on Colleges: Southern Association of Colleges and Schools, refer to <http://www.sacscoc.org/> or ACICS Accrediting Council for Independent Colleges and Schools <http://acics.org>.

Scholarship recipients will be selected without regard to race, age, gender, religion, political beliefs or any other factors which could be constituted unfair or illegal discrimination. **Application must be filled out completely for scholarship consideration.

Revised 11-22-2016



William S. Harvey Deltona Scholarship Program Application 2017

Applicant's Information

(Please print clearly using black or blue ink)

Applicant's Name: _____
(Last) (First) (Middle Initial)

Applicant's Current Address: _____
(Number and Street)

_____ *(City) (State) (Zip Code)*

Deltona Resident since: _____
(month/day/year) (Minimum of six months residency required)

Preferred Telephone Contact #: _____

Secondary Telephone Contact #: _____

Email: _____

Applicant's Driver's License or Identification Number: _____
(State and Number) (Attach photocopy to documentation submitted)

I. Applicant's Family Information:

Father's Name: _____
(if applicable) (Last) (First)

Address: _____

Phone #: _____ Email: _____

Mother's Name: _____
(if applicable) (Last) (First)

Address: _____

Phone #: _____ Email: _____

Guardian's Name: _____
(if applicable) (Last) (First)

Address: _____

Phone #: _____ Email: _____

Number of members in household: _____ *(including self).*

Number in household currently attending a post secondary institution: _____

Application must be filled out completely for scholarship consideration.

Applicant's Name: _____

II. Applicant's Financial Information:

1. Applicants **must** provide one of the following for determination of financial need:

- a) Copy of the applicant's **complete** Federal Student Aid Report (FAFSA).
- b) Copy of applicants most recent **complete** Federal Income Tax Return, (no earlier than 2015) including signature page (if filed as an independent)
- c) Copy of parent/guardian's most recent **complete** Federal Income Tax Return (no earlier than 2015) including signature page.

2. List other pending or received Scholarships/Financial Aid, and amounts:

- a) _____ \$ _____ Applied Received
- b) _____ \$ _____ Applied Received
- c) _____ \$ _____ Applied Received

III. Applicant's Personal Information:

1. List previous and current work history. Use additional paper if necessary:

Company	Employment Dates	Responsibilities

IV. Applicant's Academic Information:

(Attach Official Transcript, GED Scores, and Test Scores)

Identify school type: High School _____ Home School _____ GED _____ College/University _____

School Name: _____
(Name) *(Address)*

Have you participated in a dual-enrollment program? Yes _____ No _____

Anticipated Graduation or GED Completion Date: _____.

Current GPA: _____ Weighted GPA: _____ *(If applicable)*

Application must be filled out completely for scholarship consideration.

Applicant's Name: _____
(Last) *(First)* *(Middle Initial)*

V. Applicant's Academic/Community Involvement Information

1. List academic or community organizations/activities in which you are involved. Use additional paper if necessary. Provide contact information:

Organization Name	Advisor Name/ Phone Number	Applicant's Involvement
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. List academic awards or recognitions:

Award/Recognition	Award Description	Date Received
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. Florida college(s), university(ies), or trade school(s) to which you have applied or been accepted:

College/University applied to:	Applied (Date)	Accepted (Date)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. Anticipated:

Major: _____

Minor: _____

Application must be filled out completely for scholarship consideration.

Applicant's Name: _____
(Last) (First) (Middle Initial)

VI. Applicant's Essay Submission:

1. On a separate sheet, or sheets, of paper the applicant must use the following format guidelines:
 - a. 500-750 words in length double-spaced
 - b. Non-bold Times New Roman 12 point font
 - c. Identify the essay with applicant's name and the essay theme title.

2. For the essay, address **one** of these four theme titles:
 1. Following your planned coursework, how will you contribute to the City of Deltona's future?
 2. Why do you consider Deltona to be unique among Florida cities?
 3. Why have you chosen your specific course of study/career?
 4. Why do you feel you are qualified to receive a City of Deltona Scholarship?

Applicant's Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____
(If applicable)

For additional information, please contact:

*William S. Harvey Deltona Scholarship Advisory Board
Staff Liaison/City Clerk's Department
2345 Providence Boulevard
Deltona, Florida 32725
(386) 878-8506*

Please mail or hand deliver all pertinent documentation to:

*William S. Harvey Deltona Scholarship Advisory Board
Staff Liaison/City Clerk's Department
2345 Providence Boulevard
Deltona, Florida 32725*

Application must be filled out completely for scholarship consideration.

Disclaimer:

Scholarship award recipients have 30 days to reply in writing and submit a copy of letter of acceptance and Social Security form to the Scholarship Advisory Board. If a recipient fails to contact the Scholarship Advisory Board, funds will remain with the City of Deltona. The recipient must also notify the Scholarship Advisory Board with a copy of a letter of intent to enroll. Scholarship recipients who enroll at an accredited institution different from that listed on the application or Scholarship Recipient Acceptance Form will need to notify the Scholarship Advisory Board **immediately**. Allocated funds will be transferred to the appropriate Florida institution.

Optional Demographic Information

Name: _____
(Last) *(First)* *(Middle Initial)*

Applicant's Gender: Male / Female

Race/Ethnicity: _____ American Indian/Alaska Native

_____ Asian/Pacific Islander

_____ Black

_____ Hispanic

_____ Multiracial

_____ Other

_____ White

Date of Birth: _____
(Month) *(Date)* *(Year)*

CITY OF DELTONA WALL OF FAME

At the Regular City Commission Meeting on Monday, January 22, 2013, the Commission voted unanimously to have the William S. Harvey Deltona Scholarship Advisory Board take on the duties associated with the Deltona Wall of Fame.

The purpose of this Committee shall be to receive nominations and recognize individuals who have demonstrated outstanding service to the community of Deltona. The Committee will be responsible for searching and creating a portfolio of information on the candidate. The portfolio with a photograph, if available and suitable for display, will then be submitted to the City Commission for acceptance.

Criteria for Selection:

Candidate must have been a resident of Deltona for over ten (10) years and must have been in active public service for five (5) years.

Selection of a candidate shall be based on the nominee's contribution to the community and must exhibit integrity, character, performance, and measured achievement.

Candidate must demonstrate outstanding service to the community during their association with the City of Deltona for which they are being nominated.

Any Citizen may submit in writing, a biographical history of a candidate to be considered by the Selection Committee.

The chosen person will have a name plate placed on the Wall of Fame and a photograph, if available, along with a biography displayed in the Wall of Fame book. A complete file of biographic information will be kept in the City Clerk's Office for review.

Current members of the City Commission are ineligible to be nominees until their term of office expires.



City of Deltona Wall of Fame Nominee

Full Name: _____

Address: _____

Telephone: () _____

How long has the nominee been a resident of Deltona? _____

Describe in detail, the contributions of the nominee during his/her association with the activity or activities for which they are being nominated.

Is the nominee still associated with the activity?

How has the nominee impacted the quality of life in Deltona?

Why do you feel this person deserves to be on the Deltona Wall of Fame?

Name and telephone number of potential contacts for additional information re: nominee:

Nominated by: _____ Phone #: _____

Attach additional information, if necessary.

City of Deltona

WALL OF FAME SELECTION COMMITTEE

Nominee Scoring Sheet

NOMINEE: _____

CONTRIBUTION TO COMMUNITY: _____

PERFORMANCE:

Diligent _____

Task Oriented _____

Finisher _____

MEASURED ACHIEVEMENT: _____

TOTAL: _____

Score 1-10 in each category (Low Point 1/High Point 10)

Total Score Possible: 50

Nominee must have 70% (35 Average Points) to qualify for recommendation to the City Commission.

Wall of Fame Selection Committee Member

Date

PROFILE OF WALL OF FAME NOMINEE

NAME: _____

YEAR MOVED TO DELTONA: _____

MOVED FROM: _____

OCCUPATION/EMPLOYER: _____

CONTRIBUTION TO COMMUNITY (Reason for Nomination):

SUCCESS OF CONTRIBUTION:

HOW HAS THIS IMPACTED THE QUALITY OF LIFE IN DELTONA?

PROFILE COMPLETED BY: _____

City of Deltona

Wall of Fame Selection Committee

NOMINEE: _____ Deceased

This Nominee has been approved by the Wall of Fame Selection Committee for recommendation to the City Commission for their consideration of selection to the Wall of Fame.

Currently, there is insufficient information available for the Wall of Fame Selection Committee to recommend this Nominee to the City Commission for their consideration of selection to the Wall of Fame.

At some future time if additional conclusive information is submitted to the Wall of Fame Selection Committee, this file may be re-opened for further consideration.

Chairman, Wall of Fame Selection Committee

Date