

Angelika Deno Memorial Scholarship

Background

This scholarship fund was created in memory of Angelika Deno. Angelika Deno had a master in science and major in Special Education. She landed her dream job as an Administrator/Program Specialist of Special Schools Services at Tehama County Dept. Of Education in 2014. She was an active member of the Immaculate Conception Church in Corning. Angelika was known in the community for her fairness, dedication, friendship, sense of humor, passion, the betterment of others, and selflessness. This award is an uncommon award. What makes this scholarship unique is that when looking for the most deserving candidate, one must take the step and repeat aloud the acronym "WWAD" What Would Angelika Do? Angelika would want her family to continue her love, compassion and support for special needs. In establishing this scholarship, Angelika's family wish to recognize the dedication to continued education, self-improvement and optimism

Application Requirements

- Applicants must be a Corning Union High School graduating senior
- Applicants must have a documented learning disability
- Applicants must remit a completed scholarship application.

Scholarship Award and Payment

The scholarship will be paid out upon receipt of proof of the student's enrollment in school.

Applicant essay

The applicant must submit a double-spaced typewritten essay of no less than 500 words and no greater than 750 words. This essay should provide the following information:

- Information about yourself and your family
- Information about your learning disability, how it has affected your learning and steps you have taken to overcome or compensate for these barriers to learning
- Information about what you plan to study and why
- Information about how this scholarship will help you meet your goals

Supplemental Information

Include a copy of you transcript

Application Deadline

All applications must be turned into the CUHS Career Center no later than 3:30 PM on the last Friday in April.

ANGELIKA DENO MEMORIAL SCHOLARSHIP

(Please Type or Print Legibly)

Name of Applicant _____

Street Number _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email _____

Did you complete a FAFSA or DREAM Application? Yes No

If so, what was the EFC amount? _____

What career do you plan to pursue? _____

Why do you want to work in that field?

What school do you plan to attend? _____

Why do you want to go to that school?

What other information, if any, would you like to share about why we should offer you this scholarship?

Submit this applications to the CUHS Career Center no later than 3:30 PM on the last Friday in April.