

**Request for Reconsideration of Eligibility  
Challenge Scholars Four-Year Scholarship Opportunity**



**Due to Attendance of less than 95%**

**Please print clearly.**

**SECTION 1: CONTACT INFORMATION**

Student Name (first, middle initial, last)	
Mailing Address	
City, State, ZIP	
Date of Birth	
Current grade <b>11</b>	Current school: <b>Union High School</b>
Parent or Guardian	First and last name
	Phone
	Email
Parent or Guardian (optional)	First and last name
	Phone
	Email

**SECTION 2: STUDENT INFORMATION**

*To be completed **WITH** College/Career Coordinator, Guidance Counselor, or other school staff.*

Verify CS enrollment	<input type="checkbox"/> Yes, the student enrolled as a Challenge Scholar in 6 <sup>th</sup> grade.		
Current cumulative attendance rate			
Attendance rate by grade	9 <sup>th</sup> grade:	10 <sup>th</sup> grade:	11 <sup>th</sup> grade:
Current cumulative GPA			
SAT composite score			
Verify transcript sent	<input type="checkbox"/> A copy of the student's transcript has been sent to GRCF.		
List post-secondary institution(s) to which the student has been accepted			
Staff person signature			

**(OVER)**

**SECTION 3: SPECIAL CIRCUMSTANCES**

*To be completed by the student.*

**In the space below or on a separate page, please describe any special reasons or circumstances leading to the attendance rate of less than 95%. Attach up to one additional page if needed.**

**SECTION 4: SIGNATURE**

**Parent/Guardian signature.** By signing below, I grant permission for Challenge Scholars staff to verify and share this information with Grand Rapids Public Schools in order to determine the eligibility of the student listed above.

**Signature**

**Date**

**Printed Name**

**Return this form to Giuliana Estrada, 185 Oakes SW, Grand Rapids, MI 49503 or [gestrada@grfoundation.org](mailto:gestrada@grfoundation.org).  
If questions, please call 616-284-4928.**