



Strength over Addiction Scholarship

Application for Consideration

The Strength over Addiction Scholarship selection committee within the York Opioid Collaborative will award at a minimum two \$2,500 scholarships (\$1,250/semester). This is a one-time scholarship for selected students.

This scholarship fund is for individuals impacted by a loved one's substance use disorder or in recovery themselves pursuing post-secondary undergraduate education or technical school certifications.

- At a minimum one scholarship will be awarded to individuals pursuing a degree in psychology, sociology, human services or social work with an interest in working in the behavioral health field.
- At a minimum one scholarship will be awarded to individuals pursuing any degree or field.

The York Opioid Collaborative will award scholarships for students that meet the following criteria:

- Must reside in York County, Pennsylvania.
- Applicants must personally apply for the scholarship. Applications cannot be submitted by a third party.
- Applicants must have a parent, grandparent, sibling and/or spouse with a substance use disorder **OR** be in recovery from a substance use disorder.

Checks will be made payable to the college/university indicated above on behalf of the scholarship awardee. Applicants must notify York Opioid Collaborative **immediately if they are no longer enrolled in an approved undergraduate program or technical school certification program.*

Applicant Information

| | | |
|-------------------|---------------------------------|-----------|
| First Name | M.I. | Last Name |
| Permanent Address | | |
| Email address | Mobile Phone (Area Code/Number) | |

Education Information

Graduating High School Seniors

| | |
|---|---|
| Current High School | Date of Graduation |
| College/University you are planning to attend | Address |
| Financial Aid/Bursar's Phone (Area Code/Number) | Anticipated Major (What Field of Education and Certification (grade) level) |

Currently Enrolled College Students

| | |
|--|---|
| Current College/University | Address |
| Year Level (Freshman, Sophomore, etc.) | Financial Aid/Bursar's Phone (Area Code/Number) |
| Estimated Graduation Date | Major (What Field of Education and Certification (grade) level) |

Personal Essay

Please type, double-spaced, and attached to your completed application. Please tell us in an essay of approximately 800-1000 words total that answers the following questions:

- What are the biggest challenges being a student with a family member struggling with a substance use disorder
- What does your education mean to you and your family and why are you pursuing your chosen field of study/ major
- Why you feel you should be awarded this scholarship and how this will make a difference in your life

Letter of Recommendation

Please provide a typed letter of recommendation attached to your completed application. Letter of recommendation MUST be from a non-family member (ex. Teacher, Coach, Pastor, Employer).

Signature

I understand that the Strength over Addiction application contains confidential information about me. I declare that all information provided is true and has been provided to the best of my ability.

Signature

Date

Selection Process

An application, approved by the York Opioid Collaborative, must be completed in its entirety by scholarship applicants.

Applications must be postmarked by March 28th for the preceding the school year for which the scholarship is granted.

The Strength over Addiction Selection Committee will utilize a rubric to numerically score the applications and make recommendations for the scholarship to the York Opioid Collaborative Board of Directors for final approval.

Selection Committee will notify selected applicants by Friday, April 25, 2025.

No scholarship awards may be made to individuals or relatives of individuals who serve as board of directors for the York Opioid Collaborative or who work for the York Opioid Collaborative.

Application Checklist

- ✓ Completed Application
- ✓ Official High School Transcripts
- ✓ Copy of College Acceptance Letter (if not yet enrolled) **or** proof of registration from the registrar's office and/or class schedule
- ✓ Letter of recommendation from a non-family member (ex. Teacher, Coach, Pastor, Employer)
- ✓ Personal Essay

All materials must be hand delivered or postmarked by 5:00pm on Friday, March 28th, 2025.

Mail or Deliver to : York Opioid Collaborative

227 W. Market Street Suite 101

York, PA 17401

Notice of Failure to Complete in a Timely Manner

The York Opioid Collaborative reserves the right to deny incomplete or late submissions of scholarship applications regardless of any situation. **NO EXCEPTIONS**