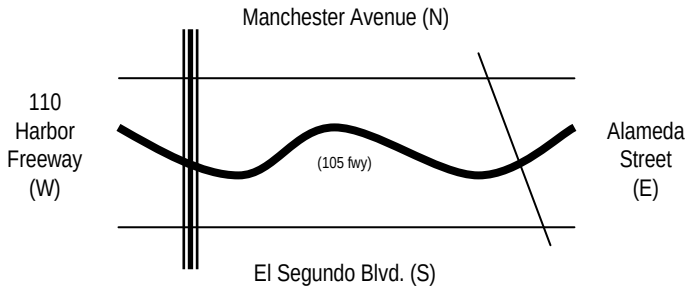
Dear Applicant,

Thank you for your interest in the *Bill Coggins Community Leadership Award*.

In June 1996, the Kaiser Permanente Watts Counseling and Learning Center was selected for the first annual national Community Leadership Award of the American Association of Health Plans, located in Washington, D.C. The Center was honored for 30 years of "enriching the quality of life in the community it serves", and also received a cash award to be used for charitable purposes.

In the spirit of this award, the Bill Coggins Community Leadership Award was created to promote community service by students and to help students continue their education. This year's awards, ranging from $1000 - $2000, will be awarded to outstanding students who:

- are currently a high school senior graduating in 2012
- have a minimum cumulative grade point average of 2.5
- have a demonstrated commitment to community leadership
- live or attend a school within the boundaries below
- will be attending a post secondary institution



If applying, please make sure that all instructions are carefully followed and that all of the required documentation is obtained and submitted ***together***.

Application packets, including ALL supplemental information, should be <u>received</u> or <u>postmarked</u> by Wednesday, February 1, 2012, 5pm:

Bill Coggins Community Leadership Award
Kaiser Permanente Watts Counseling and Learning Center
1465 E. 103rd St.
Los Angeles, Ca. 90002

Late or incomplete applications will not be considered. Notification of award status will be mailed to all applicants on or around March 14, 2012. Award is subject to verification of college enrollment. Awardees will be ***<u>required</u>*** to attend a ***<u>mandatory</u>*** *Meet and Greet* on May 5, 2012 and attend the Annual *Pursuit of Excellence* dinner on Wednesday, May 16, 2012.

If you have any questions, please call (323) 564-7911.

Good Luck!

KAISER PERMANENTE
BILL COGGINS COMMUNITY LEADERSHIP AWARD
2012 APPLICATION

APPLICATION DEADLINE:

Received or postmarked by

Wednesday, February 1, 2012

(5:00 P.M.)

INCOMPLETE OR LATE APPLICATIONS
WILL NOT BE CONSIDERED.

For this application to be considered, you must submit the following information by the deadline:

- ☐ Completed application
- ☐ Transcript from current school
- ☐ Leadership Activity Evaluation Form(s)
- ☐ Letter(s) of recommendation
- ☐ Personal statement (Maximum: 2 pages double spaced, 12 pt. Times New Roman font)

I certify that the information in this application is complete and correct to the best of my knowledge and that all required documentation is enclosed. I am aware that any false statement may result in the disqualification of my application for the Kaiser Permanente Bill Coggins Community Leadership Award.

SIGNATURE OF APPLICANT _____ DATE _____

Mailing Address

Kaiser Permanente Bill Coggins Community Leadership Award
Kaiser Permanente Watts Counseling & Learning Center
1465 East 103rd Street
Los Angeles, Ca. 90002
(323) 564-7911

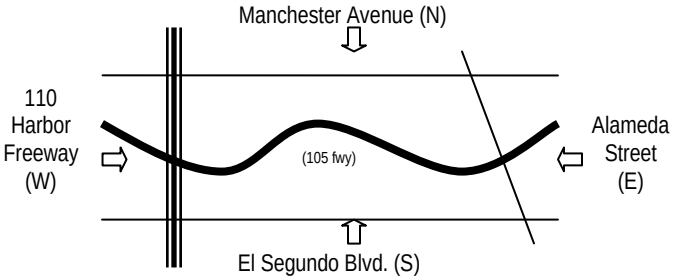
Over

KAISER PERMANENTE®

INSTRUCTIONS: PLEASE TYPE OR PRINT LEGIBLY. Respond to **all** questions listed in this application; use "not applicable" if appropriate. Each section must be completed.

ELIGIBILITY REQUIREMENTS:

a. Currently a high-school senior
b. Have a minimum cumulative grade point average of 2.5
c. Have commitment to community leadership.
d. Live OR attend a school within the boundaries on the right:



Section A: APPLICANT INFORMATION

Applicant's Name (Please Print: Last Name, First Name, Middle Initial)		E-Mail Address	
Address (Include City, State, Zip)		Do you a have? ☐ Social Security # ☐ Tax ID # ☐ Neither	
Home Phone ( ) -	Cell/Pager ( ) -	Birth Date: (month/day/year) / /	Gender ☐ Male ☐ Female
Is your parent or legal guardian a Kaiser Permanente employee? ☐ Yes ☐ No			
Ethnic Group: (check all that apply) ☐ Asian/Pacific Islander ☐ Black/African American ☐ Caucasian ☐ Hispanic/Latino ☐ Native American ☐ Other (specify) _____			

Section B: SCHOOL INFORMATION

Current School	Current Cumulative GPA	Expected Graduation Date
Counselor's Name	School Planning to Attend in Fall 2012	Already Accepted? ☐ Yes ☐ No

Section C: PERSONAL STATEMENT (Maximum: 2 pages, doubled spaced, 12 point Times New Roman font)

Describe a time or experience in your high school career or elsewhere, when you have exhibited leadership skills. This description should contain a specific example of a leadership situation and the impact of your actions in the role of a leader.

Section D: HOW DID YOU LEARN OF THE KAISER PERMANENTE BILL COGGINS COMMUNITY LEADERSHIP AWARD?

_____

_____

_____

KAISER PERMANENTE
BILL COGGINS COMMUNITY LEADERSHIP AWARD
Leadership Activity Evaluation

This award is based on leadership.

INSTRUCTIONS TO APPLICANT:
Please provide this form to an adult(s) who has supervised/mentored your participation in leadership activities.

INSTRUCTIONS TO RECOMMENDER:
You have been given this form because the applicant has identified you as someone who can comment on his/her leadership abilities. Please describe to the best of your knowledge how this applicant has demonstrated leadership qualities, skills and/or abilities. Please note that only letters speaking directly to leadership experience will be considered in support of this applicant. Place this form and letter of recommendation in a sealed envelope with your signature across the envelope seal and return to applicant.

Applicant's name: _____
Please Print

How long have you known this applicant? _____

What is your relationship to applicant? _____

Recommender's Name: _____
Please Print

Position/Title: _____

Institution/Agency: _____

Signature: _____ Date: ___/___/_____

Phone: ( ) -_____

Attach additional sheets if necessary

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