

# DULLES GREENWAY CITIZENSHIP AWARD

“A pessimist sees the difficulty in every opportunity.  
An optimist sees the opportunity in every difficulty.”  
--Winston Churchill

“Service is the rent that you pay for room on this earth.”  
--Shirley Chisholm

“Few are those who see with their own eyes and feel with their own hearts.”  
--Albert Einstein

---

## *Student Information*

---

Last Name

---

First Name

---

M.I.

---

Street Address

---

Contact Telephone

---

City

---

State

---

Zip Code

## *Schools Accepted by*

---

---

---

---

**The Dulles Greenway Citizenship Award application is due on April 6, 2010. By this date completed applications, along with two references, must be received by the guidance department at your school.**

***Short Answer Responses***

*Please answer each of the following in one to two paragraphs:*

- 1) Post High School Education Plans and Goals

---

---

---

---

---

---

---

---

---

---

- 2) List high school organizations/activities in which you are actively involved as well as those organizations/clubs/activities in which you have participated in your community. Please list first those in which you've held/hold a leadership position, and specify position(s) held. You may list all activities outside of school that you've participated in since you started high school.

---

---

---

---

---

---

---

---

---

---

***Short Answer Responses***

- 3) If we were to ask your best friends, teachers, parents and all who know you well, what five words might they use to describe your personality?

---

---

---

---

---

---

---

---

---

---

---

---

*Please answer each of the following in one to two paragraphs:*

- 4) What do you think makes someone a good citizen, and how do you embody these qualities in your everyday life?

---

---

---

---

---

---

---

---

---

---

---

---

***Short Answer Responses***

5) How do you handle the desire to be a good example to your classmates when it may not be viewed as “cool”?

---

---

---

---

---

---

---

---

6) How have you positively affected your community at school? (Be specific.)

---

---

---

---

---

---

---

---

***Letters of Recommendation***

As part of your application for the Dulles Greenway Citizenship Award, we will require two letters of recommendation. The following two pages are to be submitted, one per letter of recommendation, in a sealed envelope with the corresponding signature across the seal. This is intended to verify that the letter they submit to our selection staff is confidential.

Should you have any further questions regarding the selection and application process, please contact your school guidance department. It is unfortunate that with the many great citizens who will apply for this award, only one will be selected. Regardless of the outcome of your application, the Dulles Greenway would like to commend you on all of your efforts within the community!

***Intelligence plus character – that is the goal of true education.  
--Martin Luther King, Jr.***

## ***Recommendation Letter Form***

This form must be attached to each recommendation letter in a sealed envelope. The envelope must be signed by the author of the recommendation letter across the seal. No more than two letters of recommendation will be accepted.

Please complete the information and include your signature below before enclosing this with your recommendation letter. The sealed envelope should be delivered directly to the guidance office (not delivered through the student) to ensure confidentiality.

### ***Information***

Student Name: \_\_\_\_\_

Staff Member Name: \_\_\_\_\_

Staff Member Title: \_\_\_\_\_

Association with Student: \_\_\_\_\_

Other Comments: \_\_\_\_\_

Please sign below to verify that the letter with which this form is enclosed has not been read or related to the student listed above before submission. Please then enclose this form with your recommendation letter in a sealed envelope, and sign your name across the seal.

Signature

Date

\_\_\_\_\_

\_\_\_\_\_

## ***Recommendation Letter Form***

This form must be attached to each recommendation letter in a sealed envelope. The envelope must be signed by the author of the recommendation letter across the seal. No more than two letters of recommendation will be accepted.

Please complete the information and include your signature below before enclosing this with your recommendation letter. The sealed envelope should be delivered directly to the guidance office (not delivered through the student) to ensure confidentiality.

### ***Information***

Student Name: \_\_\_\_\_

Staff Member Name: \_\_\_\_\_

Staff Member Title: \_\_\_\_\_

Association with Student: \_\_\_\_\_

Other Comments: \_\_\_\_\_

Please sign below to verify that the letter with which this form is enclosed has not been read or related to the student listed above before submission. Please then enclose this form with your recommendation letter in a sealed envelope, and sign your name across the seal.

Signature

Date

\_\_\_\_\_

\_\_\_\_\_