

The Walter H. Scott Memorial Scholarship Fund

2018-2019 Scholarship Application

Student Information

Name: _____
First Middle Last

Address: _____
Street City State Zip Code

Phone: _____ Email: _____

Academic Information

High School Attending: _____

Address: _____
Street City State Zip Code

School Counselor's Name: _____

Phone: _____ Email: _____

Academic Performance

Simple GPA: _____ Core GPA: _____ Class Rank: _____

SAT Score: _____ ACT Score: _____

Have you been awarded other scholarships? ☐ Yes ☐ No

If yes, please list the source and scholarship amount.

1. _____
2. _____
3. _____

Applicant's Signature: _____ Date: _____

College Information

Name of College/University you plan to attend: _____

Address of College: _____
Street
City
State
Zip Code

The college you will be attending is a: ☐ 4 Year College ☐ 2 Year College

Field of Study: _____ Cost of Tuition: _____

College Enrollment Status: ☐ Full-Time ☐ Part-Time

Living Status: ☐ On-Campus ☐ Off-Campus ☐ Other _____

Financial Need Assessment

Are your parents/guardians employed? ☐ Yes ☐ No

If yes, how many family members in your household contribute to your family's primary income? _____

Total income of legal guardians: _____

Number of family members residing in household: _____

Other factors which influence financial needs (Include additional pages if needed):

Honors/Awards

Please list all your accolades.

Extra-Curricular Activities

Activity/Sport	Years Involved	Special Recognitions/Lettered
Example: Varsity Football	3	10, 11, 12 (2 Year Letterman)

Community Services Activities

Organization/Service	Date(s)/Years Involved	Brief Description of Service
Ex. Goodwill Industries (Clothes Drive)	4/13/2018	Assisted with distributing clothes

Work Experience

Employer	Dates of Employment	Brief Job Description

Essay

In approximately 200 words, type an essay on why you should be selected as the recipient of the Walter H. Scott Memorial Scholarship. Please attach the essay on a separate sheet.

Below are the required documents that must be submitted with the application.

- ☐ Application
- ☐ High School Transcript
- ☐ Two Letters of Recommendations; one (1) from a coach and one (1) from a school official, counselor, teacher, or organization
- ☐ Personal Essay (200 words)

The scholarship application must be post mark by Friday, April 5, 2019 to be considered for the recipient of the WHSM Scholarship.

Please mail your application to:

Walter H. Scott Memorial Scholarship Fund

Attn: Walter H. Scott, II

PO Box 226

West Point, GA 31833

I hereby certify that the following information provided in this application is complete and correct to the best of my knowledge. I understand that if any information provided is untrue my application will be disqualified.

Applicant's Signature

Date