

# SCHOLARSHIP CRITERIA AND INFORMATION

## ALL APPLICANTS MUST:

1. Plan to enter a Tennessee College or University in the field of *education or a child-related program*.
2. Have a financial need.
3. Submit all forms, properly completed, by the **MARCH 20, 2010** deadline to:

Nancy Loggins  
8042 Irene Blvd. #201  
Memphis, TN 38125

## NO APPLICATIONS WILL BE ACCEPTED AFTER MARCH 20, 2010.

### **COMPLETE:**

- \_\_\_\_\_ Student Application (Pages 2,3 and 4)
- \_\_\_\_\_ Brief Comments by parent/guardian (Page 4)
- \_\_\_\_\_ Administrative/Guidance Form (Page 5)
- \_\_\_\_\_ One page essay by applicant stating personal goals, objectives, and financial need (Page 6)
- \_\_\_\_\_ Two (2) letters of recommendation (Teacher, employer, etc.)
- \_\_\_\_\_ Transcript of Grades

A committee will review all applications soon after the deadline. Consideration will be given to both academics and financial need. A personal interview will be scheduled, if deemed necessary by the committee, after applications have been reviewed.

Each recipient will be notified by mail and will be asked to be in attendance at the May Shelby County Council meeting to be introduced. Additionally, each recipient will be required to submit a letter of acceptance of the scholarship to the Council at the above address.

Scholarship money will be awarded upon receipt of a copy of the school registration.

Recipients will be featured in the SCC Newsletter.

All information in this application will be kept confidential.

**STUDENT APPLICATION**

HIGH SCHOOL \_\_\_\_\_

APPLICANT'S NAME \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ AGE \_\_\_\_\_ SEX \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

**ACTIVITIES: List school and community activities**

<u>School Year</u>	<u>Organization</u>	<u>Office Held</u>	<u>Hours Per Week</u>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Experiences relating to children:**

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**Honors Received:**

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**Work Experiences:**

Employer                      Type of Work                      Hours Per Week                      Dates Employed

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College or University you plan to attend: \_\_\_\_\_

Have you been accepted? \_\_\_\_\_ Major: \_\_\_\_\_

Career Plans: \_\_\_\_\_

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Live with:  Both Parents  Mother  Father  Other: \_\_\_\_\_

Parent(s) Guardian(s) full names and occupations:

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Other dependents at home? \_\_\_\_\_ How Many? \_\_\_\_\_ Ages: \_\_\_\_\_

Other family members attending college that parent/guardian is financially responsible for?

\_\_\_\_\_ Year in College: \_\_\_\_\_

\_\_\_\_\_ Year in College: \_\_\_\_\_

Other financial resources secured by applicant:

\_\_\_\_\_ Amount? \_\_\_\_\_

\_\_\_\_\_ Amount? \_\_\_\_\_

**I hereby certify that the information given is complete and accurate.**

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**



**TO BE COMPLETED BY PARENT OR GUARDIAN:**

I have read this application and certify that information given here is correct. I believe that the applicant is serious in intent to complete a college education and with the help from the scholarship grant will be able to finance it.

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

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**Signature of Parent or Guardian**

\_\_\_\_\_

**Date**



