

Scholarships: 2017-18

Fuquay-Varina Woman's Club

GFWC Fuquay-Varina Junior Woman's Club

Local Fuquay-Varina Level:

Sallie Southall Cotten: \$1,250 FV Woman's Club

\$1,000 GFWC Junior W. C.

Two students will be selected, one to represent each club.

District VI Level: \$1,000 competition for first place

Winner Advances to State Level

State Level: 9 District Winners advance across NC

Winner \$3,000 per year for four years (total \$12,000)

Runner up \$1,000 (one time award)

Awards are paid to the colleges directly.

1. Applicant must be a high school senior residing in North Carolina.
2. Applicant must be in the upper fourth of the class.
3. Applicant must use the official application form
4. The scholarship is to be used at a four-year college or university in the state of North Carolina.
5. Citizen or permanent legal resident of the United States.

THE FOLLOWING MUST BE SUBMITTED:

1. Application form
2. Recent photograph.
3. A personal letter as to why student desires to continue their education, the student's future plans, and why financial aid is necessary.
4. Letter of recommendation from either the school principal, school guidance counselor, or a school teacher.
5. Letter of recommendation from a business or professional person **OTHER THAN SCHOOL PERSONNEL**.
6. Letter of recommendation from the President of sponsoring club.
7. High school transcript, with grades through the first semester of senior year, complete SAT and/or ACT scores, class rank with number of students in class, and grade point average weighted and unweighted.
8. Copy of most recent Federal Tax Returns or FAFSA Summary for applicant's parent(s) and applicant.
Document any significant changes in family income if necessary. Student should mark out SSN before submission.

GFWC-NC Sallie Southall Cotten Scholarship

Application Form

(Please copy for future use.)

To Be Completed By Sponsoring Club

Complete the following before delivering application to applicant.

Club _____ Town _____ District _____
 Club President _____
 Mailing Address _____
 Local Scholarship Contest will be held (date _____ Place _____
 District Scholarship Chairman _____ E-mail _____
 Mailing Address _____ Phone Number _____
 District Scholarship Contest will be held (date _____ Place _____

To Be Completed by Student

APPLICANT'S FULL NAME _____ Date _____
 HOME ADDRESS _____
 BIRTH DATE _____ PHONE (home) _____ PHONE (cell) _____
 APPLICANT'S EMAIL _____

- 1) School _____ Graduation Date _____
- 2) Name of Father/Guardian _____
 Address _____ Occupation _____
- 3) Name of Mother _____
 Address _____ Occupation _____
- 4) How many persons are dependent upon your parents? _____
- 5) Give ages of brother(s) _____ Sister(s) _____
- 6) How many brothers _____ and/or sisters _____ are in college?
 Name colleges _____
- 7) Did your parents attend college? Father _____ Mother _____
- 8) Do your parents own their own home? _____ Buying? _____ Renting? _____
- 9) What work for pay have you done during the last year? _____
- 10) What work do you plan to do this coming summer? _____
- 11) What is your NC college preference _____
 What course of study will you take? _____
- 12) Have you applied or been accepted for entrance to a college? _____
- 13) Have you informed the student aid officer of your need for financial assistance? _____
- 14) Name other scholarships for which you have applied _____
 Scholarship name and amounts you have received _____
- 15) If you are awarded this scholarship, how will the balance of your college expenses be financed? _____
- 16) Attach a list of extracurricular activities, honors and community activities.

PARENT OR GUARDIAN'S ENDORSEMENT

I (name) _____ the parent/guardian of the above applicant for a scholarship, hereby declare that, to the best of my knowledge, and belief, the foregoing statements are complete and correct. I approve the applicant's application for a scholarship.

Date _____ Signature _____

Applicant must be present for judging.