

ABWA—Granite City Chapter Scholarship Application



**2017-2017 Academic Year
Application Deadline: Friday, April 15, 2016**

Qualifications:

- ♦ Female
- ♦ Graduate of Mount Airy High School, Surry Central High School, North Surry High School, or East Surry High School
- ♦ Enrolled to attend Surry Community College (minimum of 12 for-credit hours required)
- ♦ Cumulative Grade Point Average of no less than 3.0 (must be maintained for distribution of spring semester funds)
- ♦ Demonstrate financial need
- ♦ Professional or business career goals
- ♦ Available to be interviewed

Instructions:

1. Application must be completed legibly.
2. Documents **required** for complete application:
 - ♦ Two (2) *character* reference letters
 - ♦ One (1) *academic* reference letter
 - ♦ Official transcript of courses completed to date

Application

Name:	E-mail:	
SSN:	Date of Birth:	
Permanent Address:		
City:	State:	Zip:
Home Phone:	Cell Phone:	

What do you plan to major in, and why?

List participation in school activities and community or volunteer services:

List honors and awards that you have received:

(Please feel free to attach additional pages of information on the above two items if needed.)

List other scholarships that you have applied for or received, and amount, if known:

Father's name:	Father's occupation:
Mother's name:	Mother's occupation:
Parents Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Other	
Number of siblings under age 18:	
Number of siblings age 18 or older and attending school full-time:	
Parents address (if different from yours):	

Approximate family income:

- Less than \$20,000 \$20,000-\$30,000 \$30,000-\$40,000
 \$40,000-\$50,000 \$50,000-\$60,000 \$60,000-\$70,000
 \$70,000-\$80,000 \$80,000-\$90,000 \$90,000-\$100,000
 \$100,000 or more

Please return completed application with attachments to your school guidance office, the Surry Community College Financial Aid Office, or mail to Granite City ABWA, PO Box 1815, Mount Airy, NC 27030 on or before **Friday, April 15, 2016**.

AUTHORIZATION

All the information on this form is true and complete to the best of my knowledge. I hereby authorize the release of my scholarship application, references and transcript information to any individual(s) involved in the selection of scholarship recipients. If I am chosen to receive an award, I authorize ABWA-Granite City Chapter to release/publicize my name and the name of the scholarship I have received. I agree to accept the decision of the selection committee or its designee(s) as final.

If awarded a scholarship, I will notify ABWA-Granite City Chapter Education Chair of any change in my status and I agree to provide the Chapter with a copy of my fall semester transcript.

Applicant Signature: _____ Date: _____