

BRIGGS- ARTHUR SCHOLARSHIP

SCHOLARSHIP APPLICATION 2020-2021

Please type your answers.	
1.	Last Name: _____ First Name: _____
2.	Mailing Address Street: _____ City: _____ State: _____ Zip: _____
3.	Daytime Telephone Number: () _____ Email Address: _____
4.	Date of Birth: Month Day Year Gender: _____
5.	Cumulative Grade Point Average (GPA): _____ (On a 4.0 scale) Attach proof of GPA. Your most recent school transcript is required.
6.	Are you the first person in your family to go to college: YES ___ NO ___
7.	Name and location of High School attending: _____
8.	(Please use additional paper for questions 8 and 9 if needed) A. List any academic honors, awards and membership activities while in high school: B. List your hobbies, outside interests, extracurricular activities and school related volunteer activities: C. List your non-school sponsored volunteer activities in the community:
9.	A. If you have decided on what college you will attend, please list school name: B. If not, list your top 3 college choices:
10.	List Family Gross Annual Income from your 2020 Income Tax Form 1040 Line #22: \$ <i>(If selected, recipients may be asked to verify annual household income is under \$75,000 by supplying pg. 1 of their 2019 IRS Income Tax Form)</i>
11.	Name & address of parent(s) or legal guardian(s): (Include address if different than your own listed in Question 2.) Name(s) : _____ Street: _____ City: _____ State: _____ Zip: _____ Home phone of parents or legal guardians: _____ Work phone: _____

12. On a separate sheet please write an essay (250 - 500 words) answering the questions below:

Describe how volunteer or community service has shaped who you are today and what community service has taught you. Also, discuss in your essay about any challenges or obstacles you have dealt with and overcome in life and how this will help you succeed in college and beyond.

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STATEMENT OF ACCURACY FOR STUDENTS

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship winner my picture may be taken and used to promote the scholarship program. (Winner may waive photo due to unusual or compelling circumstances.)

I hereby understand that if chosen as a scholarship winner, it is my responsibility to remit to the Briggs Arthur Scholarship the appropriate information for my scholarship to be paid directly to my educational institution.

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

Signature of scholarship applicant: _____ Date: _____

STATEMENT OF SUPPORT BY GUIDANCE COUNSELOR

I hereby affirm that this application meets the criteria set forth by this scholarship program and that I support this application to Briggs Arthur Scholarship.

Name of Guidance Counselor submitting the application: _____

High School: _____

Contact information (email and phone): _____

Signature of Guidance Counselor: _____ Date: _____

Checklist

- Application
- Essay
- Guidance Counselor signature
- School Transcript

Email Complete Application package to:
briggsarthurscholarship@gmail.com

MAIL COMPLETE APPLICATION PACKAGE TO THE FOLLOWING:

BRIGGS-ARTHUR SCHOLARSHIP
c/o Teresa Arthur
P.O. Box 720523
Orlando, FL 32872

REMINDER:

Electronic information must be received by midnight **March 31, 2021. Application must be postmarked no later than **March 31, 2021** if mailed.**

NO EXCEPTIONS!