

### C. C. Spaulding Alumni Association, Inc.

Post Office Box 842 Spring Hope, NC 27882



### **Application for Scholarship**

**TO APPLICANT:** CRITERIA TO BE FOLLOWED IN SUBMITTING APPLICATION TO THE C. C. SPALUDING ALUMNI ASSOCIATION FOR SCHOLARSHIP

- 1. Applicant must have their application postmarked on or before May 1.
- 2. Applicant must submit an official high school transcript with high school's seal and signature in a sealed envelope with application.
- 3. Applicant must have a cumulative high school grade point average of 2.5 on a 4.00 grading scale or a 2.7 grade point average on a 5.0 grading scale
- 4. Applicant must have been accepted by a two or four- year accredited college or university
- 5. Applicant must be a first year college student/freshman in a two or four-year college or university
- 6. Applicant must be attending as a full-time student during the next semester or academic year following graduation
- 7. Applicant must submit three (3) letters of recommendation (*from teachers, civil or church leaders*) in a sealed envelope with their application
- 8. Scholarship will be awarded based upon academic performance and financial need of the applicant. All sections of the application must be completed in full or a written explanation stating reason(s) for insufficient information.
- 9. Scholarship will be paid to the college or university the student is attending in the name of the student upon verification of full-time enrollment by the college or university
- 10. The scholarship committee shall recommend the amount to be given to each candidate

**IMPORTANT NOTICE:** AN INCOMPLETE APPLICATION WILL BE DISQUALIFIED.

#### Mail application with all required documentation to:

C.C. Spaulding Alumni Association, Inc.

Attention: Scholarship Committee Chairperson

PO Box 842

Spring Hope, NC 27882

NOTE: Applicant will be notified prior to high school graduation, if possible.



(Write on a separate sheet of paper)

# C. C. SPAULDING ALUMNI ASSOCIATION, INC. APPLICATION FOR SCHOLARSHIP



TO BE COMPLETED BY STUDENT: Date					
Name of High School					
1. Student's Name	Birthdate				
2. Mailing Address  2. Parata (abash if days and bash a factor of a days of					
	Phone No.: Hm:	Cell:			
3. Parents (check if deceased) 4. Age of othe	r children in your family				
Father					
Mother	n of other children in your fam	ily			
6. High School Course (Circle One): Academic	c General or Business Vocat	tional			
7. List major extracurricular activities in high so	:hool:				
8. SAT Scores: Junior Year	Senior Year				
Verbal:	<u>Semor rear</u>				
Moth:					
ACT Scores:					
9. What are your career plans after high school	graduation?				
10. List the colleges or universities that you are	applying to:	<del>-</del>			
11 11 11 11 11 11 11	. 1				
11. List the colleges or universities that have ac	cepted you at this time:				
12. What other loans, scholarships, or grants are	e vou anniving for?				
12. What other loans, scholarships, or grants are	you applying for:				
13. List loans, scholarships, grants that you have	e been granted and amounts:				
14. Have you earned money?	If so, How?				
15. Write a 3-5 paragraph essay explaining why	vou need financial help to con	tinue your education.			



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### **CONFIDENTIAL INFORMATION**

### TO BE COMPLETED BY PARENT OR GUARDIAN:

Note: The information requested of parents below will be held in strict confidence by the members of the Scholarship Committee

<u>Occupation</u>	Total Wages & other income before taxes
Father	
Mother	
Federal Income Taxes Paid by Parents in	<u> </u>
Do you own your home?	
If you own your home, give its present market	value
We declare that the information reported abov	ve is true, correct, and complete.
Parent's Signature and date	Applicant's Signature and Date