

King Chatman Cherry Memorial Scholarship Fund, Inc.

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SECTION I: STUDENT DATA					
APPLICANT INFORMATION—FOR SCHOOL YEAR 2013-2014					
Application for Scholarship Funds—Please Read Carefully—All Due Dates -Complete Application and Return.					
Applications Received After Due	e Date Will not Qualify. Please	e Include Essays and Letters of Recommendations.			
Last Name	MI	First Name			
Home Address:					
City - State - Zip Code:					
	Contact Infor	<u>mation</u>			
Home Number:					
Alternative or Cell Phone N	umber:				
E-Mail Address:					
Social Security Number:					
Current Grade:	Age:	Date of Birth:			
	Section II: Pare	ental Data			
Father's Name or Guardian:					
Home Number, Work Numb	per and Cell Number:				
E-Mail Address:	,	•			
Mother's Name or Guardian	:				
Home Number, Work Numb	oer and Cell Number:				
E-Mail Address:	,	,			

Section III: Educational Information Please indicate your Academic Status for 2013-2014: Status: High School: \_\_Freshman \_\_Sophomore \_\_Junior \_\_Senior \_\_GED Current School Attending: When does the Academic School year End? \_\_\_\_\_ What is your current Grade Point Average? GPA:\_\_\_\_\_ Date: \_\_\_\_ \_Entering Freshman To Begin \_\_\_\_\_ Classification \_\_\_\_\_ \_Presently Enrolled Returning To Begin Transfer Student To Begin \_\_\_\_\_ College, University or Training Institution attending or You Plan to Attend: Area of Study: Date Expected To Complete: **Comments:** 

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Prior / Current School Activities: (Use an additional sheet, if necessary)	
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<u>King Chatman Ch</u>	erry Memorial Scholarship Fund, Inc.	
School/Community Honors or Awards: (U	<u>Jse an additional sheet, if necessary)</u>	
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Community/Volunteer Activities: (Use an additional sheet, if necessary)	
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King Chatman Cherry Memorial Scholarship Fund, Inc.	
Household Information:	
Applicant's Name:	
Occupation:	
Place of Employment:	
Contact Name:	
Contact Number:	
Annual Income:	
Check one that applies:	
——Works full time, year round	
——Works full time, summer only	
——Works part time, year round	
——Works part time, summer only	
——Does not work at all	
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King Chatman Cherry Memorial Scholarship Fund, Inc.  Explain any additional personal or family circumstances affecting your need for financial assistance:
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### Application for Scholarship

#### Letter of Recommendation (Senior Only)

Submit one Letter of Recommendation from your high school guidance counselor, teacher, or principal. The Letter of Recommendation must be typed on <u>official letterhead</u>. The letter should come from an individual who knows you well and can attest to your character, leadership ability, commitment to community service, and academic achievement. <u>The letter must me addressed to the King Chatman Cherry Memorial Scholarship Fund, Inc.</u>

#### Essay Writing (Senior Only)

Senior applicants must select <u>one</u> subject from following topics listed below:

# IT MUST BE TYPED DOUBLE SPACED AND A MINIMUM OF 500 WORDS. REMEMBER TO SITE EXAMPLES.

<u>Note:</u> The scholarship funds are paid directly to the institution. If, for any reason, you drop out and do not complete the term for scholarship applies, then <u>you will be required</u> to repay the scholarship.

**Application for Scholarship** 

King Chatman Cherry Memorial Scholarship Fund, Inc.

Please mail application/questions to:

Dr. Bonita Torbert

King Chatman Cherry Memorial Scholarship Fund, Inc.

Post Office Box 432

Thomaston, Georgia 30286

E-mail: contact@kccscholarship.org

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## King Chatman Cherry Memorial Scholarship Fund, Inc.

### Application procedures:

- Each applicant must <u>fully</u> complete the application for the King Chatman Cherry Memorial Scholarship Funds and mail to the address above.
- 2. Applications must be received no later that March 31, of each year in order to receive full consideration for scholarship funds for the coming school year. No application will be considered if postmarked after the cut off date.
- 3. Scholarships can be awarded to student accepted by an accredited college, university, or training institution. (Accredited by Association of Colleges and Schools for the area in which a college, university or training institution is located. <u>The scholarship funds are paid directly to the institution.</u>

#### Responsibility Statement

I understand that it is my responsibility to inform the King Chatman Cherry Memorial Scholarship Fund, Inc. any changes in my attendance, academic studies, and other changes that may affect the rewarding of this scholarship in accordance with established terms, guidelines, and procedures as outlined.

<u>I understand that my failure to do so MAY JEOPARDIZE MY REQUEST FOR SCHOLASTIC ASSISTANCE.</u>

Therefore, I/We declare that the information reported on this application and the required material submitted are accurate and complete.

Signature of Father/Male Guardian	Date
Signature of Mother/female Guardian	Date
Signature of student/Applicant	Date
All information held in the S	Strictest Confidence
**************************************	al Scholarship Fund, Inc.—Use Only*******

Date Received Signature