

Lyman Seniors ONLY

Due 4/02/2021/Friday 2:30 P.M. at the Lyman Student Services

• **Carlton Henley Scholarship - \$500** • **Sam Momary Scholarship - \$500** • **Bill Scott Scholarship - \$500**

APPLICATION FORMAT AND SUBMISSION

Application Process: Only need to submit **ONE application package** to be considered for all three scholarships. Enclose the following items in the EXACT order listed below, in a large manila envelope.

1. Completed Student Portfolio;

Please respond to the following, using a separate sheet of paper. Number your responses **A - D** as shown below.

A. Statement of Financial Need:

Please provide information about the financial situation in your household. This can include parent's working status, number of dependents at home, homelessness, and any description of financial hardships experienced. If parental assistance is not available, how do you intend to finance your education? Explain why you need financial assistance to continue your education.

B. School Activities/Recognition/Honors:

Please specify your academic, athletic, vocational, and extracurricular activities; including leadership roles.

C. Community Activities:

Please specify your participation in clubs, organizations, volunteer services, or involvement with your religious community.

D. Employment Experiences:

Please specify any employment you may have had, the length of employment, and a description of your job.

2. An Essay to share your Education and Career Goals;

In a 200-500 (maximum) word typed essay, describe future goals, including the field in which you intend to major. The essay is weighted heavily in the judging process. In the event of applications with similar qualifications, the essay will be the determining factor.

3. Personal Reference (Recommendation from a high school staff member or counselor);

4. Evidence of college acceptance or processing;

5. Attach Information Page on the page 2.

DISBURSEMENT OF AWARDS

The recipient must use the award within one year of issuance. A check in the amount of the award shall be disbursed to the educational institution that the student will attend (unless otherwise noted). In the event the recipient decides not to use the scholarship, he/she must notify **The Foundation for Seminole County Public Schools** immediately. **Selection of the winners is final.**

*** Please type or print information. *** Due 4/02/2021/Friday 2:30 P.M. at the Lyman Student Services

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Student Information**

Name: _____
Last First Middle

Address: _____
Street City Zip

Telephone: _____ Counselor: _____

Email Address: _____

Cumulative Weighted GPA _____ SAT Score _____ ACT Score _____

Schools to which you have applied: _____ Accepted?
_____ Accepted?
_____ Accepted?

Florida School You Plan to Attend: _____

Field of Study: _____

Have you applied for/received other financial aid or scholarships? (Circle one) YES NO
List: _____

Do you qualify for Free and Reduced Lunch? (Circle one) YES NO

Are you eligible for the Bright Futures Scholarship? (Circle one) YES NO

Have you already received financial aid? (Circle one) YES NO Amt. received \$ _____

Have you applied for/received other financial aid or scholarships? (Circle one) YES NO
List: _____

Are you eligible for the Bright Futures Scholarship? (Circle one) YES NO

Have you already received financial aid? (Circle one) YES NO Amt. received: \$ _____

Notification and Signatures

By you and your guardian signing below, you are affirming that the information provided in this scholarship application is representative of the individual applying, and an accurate recording of your high school record. All grades and test scores will be verified through Skyward.

Additionally, by signing below you give The Foundation for Seminole County Public Schools permission to honor you on our website by publishing (1) your name, (2) high school attended, (3) name of institution where you plan to continue your education, and (4) your intended field of study.

The scholarship recipients will be notified by his/her school administration after all applications are reviewed by the committee.

X _____
Signature of Applicant (Mandatory)

Date

X _____
Signature of Parent/Guardian (Mandatory)

Date