

St. Andrew's Society of North Carolina

Scholarship / Grant Application

Please type or use black ink when completing this form	D / /	r	Enclose a recent wallet size picture of yourself here (Head and Shoulders)		
	Reply to: Scholarship Chairman, Schola St. Andrew's Society of NC PO Box 83 Goldston, NC 27252	-			
APPLICATION FOR AG	CADEMIC YEAR	20 to 20			
How were you inform	ed of these scholarships?				
PERSONAL INFORM	ATION:				
Name: Mr. Miss Mrs. First	Middle	Last	TIN or SSN(required)		
Permanent Home Address:	Number & Street	City & State	Zip		
Email Address:		Telephone #			
Date of Birth:	Place of Birth:	Marital Status:			
Name of Parents or Guar	dian:	Telephone #			
Address: Number & Stre	pet	City & State	Zip		
Give briefly the basis for cla	aiming Scottish descent, if not born	in Scotland:			
	DRMATION: (if applying for a ege attended with dates and year				
School	City & State	Dates Attended	Degree		
Name & location of educati	onal institution you wish to attend:				
Have you applied?	Been admitted?				
In what field of study are yo	ou engaged or intend to major?				
		onal sheet if needed):			

APPLICANT'S STATEMENT:

Attach a one or two page statement about yourself, typed or handwritten. The statement might include remarks on your aspirations, reasons for applying for this scholarship or grant and other information you think would help in evaluating your application.

RECORD OF HIGH SCHOOL, COLLEGE AND COMMUNITY ACTIVITIES: Indicate by year and class (sophomore, junior, etc.) the time of your activity.

Academic Honors in School or Special Scholastic Achievements or Activities:

School Publications or Clubs:

Participation in Sports, Athletic Teams:

Employment during School Sessions or in Summer Periods:

Community	, Religious or	Civic Activities:		

Other Hobbies or Interests:

SPECIAL CIRCUMSTANCES:

If there are special circumstances not covered in the application that you wish the Committee to consider, please describe them below. If needed, use a separate well identified sheet.

FINANCIAL STATEMENT:

Give detailed statement of need and of other resources that will be available. Present information on personal savings and expected funding from your family. State occupations of your parents and list any sisters or brothers whose education would depend on family financing. State grants in hand or those requested from other programs. Use separate sheets if necessary.

ACADEMIC:

Enclose a school transcript or authentic statement from school of academic average and class standing.

Give the name, full address, and teaching role of two academic persons that you will ask to write directly to Chairman, Scholarship Committee.

Name	Academic Role	Address
Signature		Date:

THIS APPLICATION AND OTHER REQUIRED DOCUMENTS SHOULD BE RECEIVED BY: NOVEMBER 1

Late applications will be considered as long as funds are available.

Revised 5/6/2019