



**Gamma Xi Boulé Foundation, Inc.**

[www.gammaxifoundation.org](http://www.gammaxifoundation.org)

[Email: gammaxifoundation@gmail.com](mailto:gammaxifoundation@gmail.com)

## **Matthew Carter Scholarship Application**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent / Guardian Name: \_\_\_\_\_

High School Attending: \_\_\_\_\_

College Planning to Attend: \_\_\_\_\_

Anticipated Major: \_\_\_\_\_ (See Scholarship Criteria)

### **Evidence of Scholarship, Leadership and Community Service Achievements**

(Use a Separate Sheet for this Section)

Applicant Signature: \_\_\_\_\_

Parent / Guardian Signature: \_\_\_\_\_

Guidance Counselor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### **Return application with supporting documents to:**

**Gamma Xi Boulé Foundation, Inc**

**P.O. Box 20117, Bradenton, FL. 34204**

**COMPLETED APPLICATIONS MUST BE RECEIVED BY April 6, 2018.**