

#### LEGACY FOUNDATION SCHOLARSHIP PROGRAM

The A. Bailey Legacy Foundation for Women Scholarships will be awarded to the high school senior(s) who best meet the requirements set forth by the Scholarship Committee. Scholarship awards are limited to cover tuition and fees. Award amounts are at the discretion of the Scholarship Committee.

The Selection Committee will review, and score all submitted applications. Applicant's references may be contacted by telephone. The Scholarship Committee may choose to interview applicants. The scholarship recipients will be notified by April 15th.

## **Guidelines for the Legacy Foundation Scholarship Program**

Scholarships are open to graduating high school seniors that are currently enrolled in a local high school. Scholarship monies will be paid directly to the educational institution in the student's name.

Student applicants must meet the following guidelines:

- 1. Plan to attend an accredited college or university on a full-time basis.
- 2. Must have a Grade Point Average (GPA) of 3.0 or higher on a 4.0 scale.
- 3. Must have acquired acceptance letter to a four-year college/university of his/her choice and must be an enrolled full-time student for the fall semester.

Student applicant should note any special financial needs on their application form.

All applications and supporting documents must be received no later than March 30th. Please advise your high school/college registrar of this deadline for submission of transcripts and other supporting documentation.

Student must mail the completed application form and all requested documents to:

Legacy Foundation for Women Scholarship Committee P.O. Box 30221 Winston-Salem, NC 27130



# LEGACY FOUNDATION SCHOLARSHIP PROGRAM

#### SCHOLARSHIP AWARD APPLICATION

#### **INSTRUCTIONS:**

- 1. All questions must be answered. Incomplete applications will be disqualified. Please use N/A to indicate unable to answer. Leave no blanks.
- 2. Applications must be typewritten or identically reproduced in computer form. All handwritten applications will be disqualified. The application form can be found on the Legacy Foundation for Women website, www.legacyfoundationforwomen.com
- 3. Attach additional sheets as needed in order to complete questions 6, 7, 8, and 9.
- 4. Applications must include the following:
  - + Complete Application form, including two-page essay
  - ★ Three references with complete contact information for each (on application form)
  - + A copy of your most recent high school and/or college (may be sent separately)
  - ★ Copy of college acceptance letter
  - → Community Service Hour Log
- 5. Applications must be received or postmarked by **March 30th.**

### THERE WILL BE NO EXCEPTIONS.

Please mail completed applications to:

Legacy Foundation for Women Scholarship Committee P.O. Box 30221 Winston-Salem, NC 27130

6. Successful applicants will be notified on or before April 15th. Interviews may be necessary.

**Note:** Scholarship awards are limited to cover tuition and fees. Amounts awarded to successful candidates are at the discretion of the Scholarship Committee.



		Scholarship Application Fo	orm						
1.	Student's Name:								
2.	Ethnicity: African American								
3.	Are you a U.S. Citizen If not, are you a permanent resident								
4.	List the current High School that you have attend:								
	School	Principal	GPA/Maximum Cumulative/All semesters						
5. 6.	Extracurricular Activitie	e GPA based on 4.0 weighted sca s: (Include sports, clubs, offices h	eld in school.)						
7. ——	7. Community Service Activities: (Include church and community activities.)								
8.	What college will you attend?								
Have	you been accepted by the	e college of your choice?							
Wha	t is your degree plan <u>AND</u>	why did you choose this plan?							
9.	Applicant's Brief Emplo	yment History (If Any):							



Please supply three personal adult references-other than relatives (i.e., teachers, pastolong time personal friends).						
long time personal mo	nus).					
Name	Relationship	Home phone	Work pho			
•	aduation:and contact information:		,			
•	and contact information:	Date				
Applicant's signature a	and contact information:					
Applicant's signature a	and contact information:	Date State	Zip Code			
Applicant's signature a	and contact information:  ature  City	Date State	Zip Code			

DEVIATION FROM INSTRUCTIONS MAY RESULT IN DISQUALIFICATION

# **Community Service Hours Log Sheet**

Student Name:	Organization/Charity/Project:				
Date	Duties Performed/ Location	Supervisors Initials/Comments	Hours Worked		
Total Number of Hours = Student Signature:					