## Palm City Art Associates, Inc Scholarship Application 2025-2026

Criteria: Martin County Student graduating in 2026 seeking higher education in Visual Arts.

APPLICANT DATA			
Name			
Street Address			
City/ Zip			
Home Phone		Cell	[
Email			
Name of your High School			
How long have you lived in Flori	da?	Но	ow long in Martin County?
SIBLINGS			
NAME	AGE	GRADE	NAME OF SCHOOL, if applicable
TRANSCRIPT DATA			
What is your class rank?	Т	otal # ir	n your graduating class
•			mulative weighted GPA
			English: Reading:
SAT Evidence based reading a			
Waiting for scores? Yes or No		·o' ——	
Do you plan on taking: ACT ag	` ,	or No	SAT Yes or No (circle)

DUAL ENROLLMENT						
Are you taking dual enrollm	ent cou	urses? \	Yes or	No (	(circle)	
If Yes, How many credits ho					` ,	
Will you receive an Associat		•			•	
If yes, what is your concent	Ŭ	, 0				to (en ere)
,,						_
CAREER & TECHNICAL EDU	CATION	J				
Are you participating in a Ca	areer &	Technica	l Educatio	n? Y	es or 1	No (circle)
If Yes, How many course lev						(3.1.3.3)
Have you earned/expected		•		25	or I	No (circle)
If yes, please list all certifica		•				•
,, p			a or p cooc			8
*OFFICIAL DOCUMENTATION	MAY BE	REQUES	TED BY TH	E SCI	HOLARS	<b>SHIP COMMITTEI</b>
POST SECONDARY DATA						
			APPLIE			ACCEPTED
Write name of school you pla	an to at	itend;	YES N		Waiting decision	
Mark an <b>X</b> in the boxes				$\neg \mid$		
1st CHOICE						
2nd CHOICE						
31 a Choice						
Field of study you plan to pu						
Field of study you plan to pu		HOURS PER WEEK	SUMMER HR PER WEEK	S RE:	SPONSIBIL	LITES
Field of study you plan to pu  WORK EXPERIENCE	rsue;	HOURS		S RE	SPONSIBIL	LITES
Field of study you plan to pu  WORK EXPERIENCE	rsue;	HOURS		S RE:	SPONSIBIL	LITES
Field of study you plan to pu  WORK EXPERIENCE	rsue;	HOURS		S RE:	SPONSIBIL	LITES

## **COMMUNITY INVOLVEMENT**

List all community activities / volunteer work for non -profit organizations you have experienced, such as non school organizations, activities thru church, scouting, theater, the arts, environmental groups, etc. Also, indicate special awards, honors or offices held.

(Do not include extracurricular activities in this section)

ORGANIZATION NAME	LENGTH of TIME	TOTAL HOURS	DESCRIPTION of ACTIVITY	AWARDS, HONORS, POSITIONS HELD

## Estimate # of hours per year

Activities/Clubs/Sports	9th	10th	11th	12th	Office/Leadership position/ Awards/Honors

## **POSITVE CONTRIBUTIONS**

Please describe what you feel is your most positive contributions to your high
school or to one of your community activities.

UNIQUE CIRCUMSTANCES
Are there any special financial and/or personal circumstances that need to be considered?
ESSAY
Please attach an essay to this application discussing your career goals, reason for seeking higher education, reason for pursuing a particular field of study, and/or reason for choosing a particular college. (no more than one page, typed)
Signature
All information on this form, including attachments, is true, correct, and complete. Verification may be obtained from any source. The applicant hereby authorizes the release and use of the applicant's name and photograph to scholarship donors if they are selected as award recipients.  Signature of student Date
Signature of student Date
APPLICATION CHECK LIST
All sections filled out on this Application  1-2 letters of recommendation Copy of transcript Portfolio for interview Include any additional supporting or additional information, if applicable Signature

Email completed application with any additional information by December 15, 2025 to: jlm37@aol.com

Additional applications can be found on our website: palmcityartassociates.org

<sup>\*</sup>Please note, if selected, an interview along with your portfolio with the PCAA Scholarship Committee will be scheduled at a later date.