

**Palm City Art Associates, Inc  
Scholarship Application 2024-2025**

Criteria: Martin County Student graduating in 2025 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 Florida? \_\_\_\_\_ How long in Martin County? \_\_\_\_\_

**SIBLINGS**

NAME	AGE	GRADE	NAME OF SCHOOL, if applicable

**TRANSCRIPT DATA**

What is your class rank? \_\_\_\_\_ Total # in your graduating class \_\_\_\_\_

Cumulative unweighted GPA \_\_\_\_\_ Cumulative weighted GPA \_\_\_\_\_

ACT Composite: \_\_\_\_\_ Math: \_\_\_\_\_ Science: \_\_\_\_\_ English: \_\_\_\_\_ Reading: \_\_\_\_\_

SAT Evidence based reading and writing: \_\_\_\_\_ SAT Math: \_\_\_\_\_

Waiting for scores? Yes or No (circle)

Do you plan on taking: ACT again? Yes or No      SAT Yes or No (circle)

## DUAL ENROLLMENT

Are you taking dual enrollment courses? Yes or No (circle)

If Yes, How many credits hours have you earned? \_\_\_\_\_ Expected \_\_\_\_\_

Will you receive an Associates Degree by graduation? Yes or No (circle)

If yes, what is your concentration? \_\_\_\_\_

## CAREER & TECHNICAL EDUCATION

Are you participating in a Career & Technical Education? Yes or No (circle)

If Yes, How many course levels will be completed? \_\_\_\_\_

Have you earned/expected Industry Certifications? Yes or No (circle)

If yes, please list all certifications earned and expected to earn by graduation.

**\*OFFICIAL DOCUMENTATION MAY BE REQUESTED BY THE SCHOLARSHIP COMMITTEE**

## POST SECONDARY DATA

	APPLIED		Waiting decision	ACCEPTED	
	YES	NO		YES	NO
Write name of school you plan to attend; Mark an X in the boxes					
1st CHOICE _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2nd CHOICE _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3rd CHOICE _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Field of study you plan to pursue; _____					

## WORK EXPERIENCE

EMPLOYER	DATES/ GRADE	HOURS PER WEEK	SUMMER HRS PER WEEK	RESPONSIBILITES



## SCHOOL ACTIVITIES

Estimate # of hours per year

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

## POSITIVE 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 \_\_\_\_\_

## 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

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

**Email completed application with any additional information by December 15, 2024 to: [jlm37@aol.com](mailto:jlm37@aol.com)**

*Additional applications can be found on our website: [palmcityartassociates.org](http://palmcityartassociates.org)*