

Second Union (Rosenwald) School Museum Corp.  
2843 Hadensville-Fife Road (Physical Address)  
P. O. Box 1261 (Mailing Address)  
Goochland, Virginia 23063

*“Preserve ~ Highlight ~ Inspire”*

*secondunionrosenwaldschool@gmail.com*  
*www.secondunionrosenwaldschool.org*

## **2025 Second Union Rosenwald School Museum (SURSM) College Scholarship**

### **GENERAL INFORMATION:**

- Four (4) students from Goochland High School accepted at an accredited four-year college/university will be awarded a \$500 scholarship.
- Two (2) students from Goochland High School accepted at an accredited two-year community college will be awarded a \$250 scholarship.
- SURSM College Scholarships are not renewable.
- All completed applications must be emailed to **jule0424@gmail.com** by **Friday, May 2, 2025**.  
**Only complete application packets will be considered.**
- All applicants are responsible for having their applications and essays proofread by at least two (2) other persons before submitting to SURSM, i.e. your guidance counselor and/or English teacher.
- By accepting the scholarship, you agree to provide a photograph and a short summary of your credentials, and you consent to have these details published on the Second Union Rosenwald School Museum Corp’s website.

### **➤ STUDENTS ELIGIBLE TO APPLY:**

- Will graduate from GHS in Spring of 2025.
- Possess at least a **2.5** cumulative grade point average.
- Will attend a four-year college/university or two-year community college.
- Demonstrate completion of a minimum of 20 hours of community service.

### **HOW TO APPLY and SUBMIT YOUR SCHOLARSHIP APPLICATION**

- To apply, please contact the Guidance Department at GHS for a printed copy of the 2025 SURSM College Scholarship Application.
- Please scan necessary components prior to emailing your application packet.
- Please e-mail your completed packet to **jule0424@gmail.com**.
- All components must be received by the due date for your application to be considered.  
**NO partial application packets will be considered.**

## 2025 SURSM College Scholarship Checklist

Please use the following checklist to place a check mark beside each item as completed.  
**Please scan and email the checklist along with your application to *jule0424@gmail.com* by Friday, May 2, 2025.**

Name \_\_\_\_\_  
(First) (Middle) (Last)

### I have enclosed the following in my email packet to SURSM:

- \_\_\_\_\_ *SURSM Scholarship Checklist* signed by a GHS Counselor certifying cumulative GPA.
- \_\_\_\_\_ Completed SURSM Scholarship application
- \_\_\_\_\_ Essay includes:
  - \_\_\_\_\_ 250-300 words, typed, and doubled-spaced
  - \_\_\_\_\_ Plan of Study
  - \_\_\_\_\_ Why this field is chosen
  - \_\_\_\_\_ Influences of others
  - \_\_\_\_\_ Ways Goochland County shaped your decision
- \_\_\_\_\_ A copy of the acceptance letter/email from the college/university you plan to attend.
- \_\_\_\_\_ A copy of the Community Service sheet signed by a representative from the organization(s).
- \_\_\_\_\_ This checklist signed by a GHS Counselor or school official.

### School Official Certification

This student, \_\_\_\_\_, is a senior at Goochland High School. The student's cumulative GPA is \_\_\_\_\_ as of \_\_\_\_\_ (date).

Signature \_\_\_\_\_

Title \_\_\_\_\_

## 2025 SURSM COLLEGE SCHOLARSHIP APPLICATION

Name \_\_\_\_\_  
(First) (Middle) (Last)

Home Address \_\_\_\_\_

City \_\_\_\_\_, VA Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

School Email \_\_\_\_\_

Personal Email \_\_\_\_\_

GPA \_\_\_\_\_

Name of college/university planning to attend \_\_\_\_\_

Major (if known) \_\_\_\_\_

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

Parent/Guardian Address \_\_\_\_\_

City \_\_\_\_\_, State \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian Home Phone \_\_\_\_\_

Parent/Guardian Mobile Phone \_\_\_\_\_

Date	Name of Organization	Responsibilities	# of Hours	Contact Name & Phone #

(Can be provided by either the organization or GHS Guidance Department)

Signature \_\_\_\_\_

Title

Name \_\_\_\_\_  
(First) (Middle) (Last)

- **Explain college/university course of study**
- **Reason field chosen**
- **How your education in Goochland County shaped you decision (include influences of others)**

Submit on a separate sheet of paper ***without your name.***

I, \_\_\_\_\_, verify the information submitted is accurate to the best of my knowledge.

Parent/Guardian Signature (under 18 years of age) \_\_\_\_\_ Date \_\_\_\_\_, 2025

Student Signature \_\_\_\_\_ Date \_\_\_\_\_, 2025