

\$1,500 Eberhart Scholarship

The purpose of the Eberhart Scholarship is to provide financial assistance to a graduating senior from a Guilford County Schools' high school that may not otherwise be able to attend an institution of higher learning.

The scholarship award will be for attendance at a state or private four-year college or university in North Carolina. The deadline is May 1, 2017 and the notification of the scholarship will be by May 26, 2017. Please contact Chair of the Enrichment Fund for the Guilford County Schools, chair@enrichmentfund.org, with any questions.

Requirements for Consideration

1. Complete the attached application and send it to:

Eberhart Scholarship
Enrichment Fund for the Guilford County Schools, Inc.
PO Box 10208
Greensboro, NC 27404
Deadline: May 1, 2017

- 2. Provide a copy of your official transcript along with the application.
- 3. Submit two (2) recommendations using the **Eberhart Scholarship Recommendation Form** provided for:
 - 1. A Principal **or** School Counselor **or** a Teacher (choose only one)
 - 2. A community representative (must not be a relative)

All recommendations must be received with the completed application

Criteria for Selection

- 1. GPA (3.0 minimum) and SAT scores
- 2. Curriculum or course of study pursued during high school
- 3. Standing in the graduation class
- 4. Participation in extra-curricular activities
- 5. Participation in community activities
- 6. Financial needs of the applicant

Eberhart Scholarship Student Application

Name									
Home mailing address									
City State Zip code									
Home phone number	Email address								
Date of birth Male □ Female □									
Name of current high school									
Name of college/university for	which aid is requested								
Major field of study									
List of School Activities (Atta	ach additional sheets if necessary)								
Activity	Number of years Participating	Special honors or offices held							
1									
3									
4									
6									
List of Community Activities									
Activity	Number of years Participating	Special honors or offices held							
1									
2									
4									
5 6									
List summer or part time emp	ployment								
Position held	Period of employment	Hours per week							
1									
ა									
4									

Financial Information

1. Parents' gross income (if living with both) \$
If living with one parent Father \$
Mother \$
Mother's Employment:
Father's Employment:
How much does the non-custodial parent plan to contribute towards the college costs? \$
2. Applicant's savings or earnings for college. \$
3. Number of individuals living in your household during the next school year (fall 2017)? (Please include yourself) ———————————————————————————————————
4. Total number in your family attending college at least half time beginning (fall 2017)?
5. Explain any unusual circumstances that make your financial situation particularly difficult.
6. Has your parents' financial situation changed during the past 6 months? Please explain.
7. Have you applied for any other financial scholarships? Yes No
If yes, please complete the following:
Name of Institution Offering Scholarship Amount Requested Amount Granted
Application Statement
The information provided in my application is, to the best of my knowledge, complete and accurate. I understand that false statements on this application will disqualify me from the scholarship.
Applicant Signature
Date

Personal Statement

In an essay of 500 words or less, describe your aspirations and how your educational plans relate to them.
(Attach a separate sheet if necessary.) Essay must be typed.



Eberhart Scholarship Recommendation Form

The student below is applying for the Eberhart Scholarship, which provides assistance for a graduating senior from a Guilford County high school who may not otherwise be able to attend an institution of higher education. Your recommendation is needed as part of the application process. Please complete this form and return via courier to:

Eberhart Scholarship Enrichment Fund for the Gu PO Box 10208 Greensboro, NC 27404		Deadline: May 1, 2017 To be included with student application				
To be completed by applicant Name of scholarship applicant Applicant's home address School applicant desires to att	· ·					
To be completed by reference In what capacity have you kno		ant?				
Please rank the applicant in th ranking and 1 being the lowes		itegories on a sca	ale of 1 to 5	with 5 being t	he highest	
	5	4	3	2	1	Unknown
Evidence of promise						
Scholastic achievement				0		
Cooperation				0		
Perseverance						
Character				0		
Personality				0		
Work habits						
Please use the back of this f scholarship.	orm to write	a brief recommo	endation o	f the applican	t for this	

Signed _____ Title_____

Address _____ Phone ____