

GFWC Oviedo Woman's Club
P. O. Box 620522, Oviedo, FL 32762-0522
HIGH SCHOOL SCHOLARSHIP APPLICATION
DUE MARCH 1, 2020

INSTRUCTIONS

Please answer all questions carefully and completely. **Fully completed applications must be submitted and postmarked before midnight, March 1, 2020.** The GFWC Oviedo Woman's Club [OWC] scholarship committee will have the full responsibility for selecting the winner. You may be asked to interview with the committee in the final selection round. The OWC committee will hold all information confidential. All checks will be issued in the name of both the school and the recipient.

Use this checklist to ensure your application is complete.

To be considered you must:

- Be a High School senior in Seminole County **and** be zoned for Oviedo or Hagerty High School*
- Have a weighted cumulative grade point average [G.P.A.] of 3.0 or above and provide official transcripts [certified and sealed]*
- Fully complete the OWC High School Scholarship Application below, and provide information on a separate sheet of paper detailing your extracurricular school activities, honors, and community involvement*
- Provide a detailed report of your volunteer service on a separate page and attach to this application*
- Secure and attach 2 letters of reference from two of the following: teacher, counselor, administrator, job supervisor, church clergy, or someone who works with you in the community*
- Submit a **typed essay of no more than 500 words**, giving a brief description of how you view yourself based on personal qualities and attributes and your ultimate future academic and career goals. Please include a detailed description of your financial situation including your need for financial aid to attend college. You may share additional types of information if you feel it would assist the committee in the selection process. [Essays that exceed the 500 words or are not typed will not be accepted.] Please attach copies of any newspaper or magazine clippings that may also assist the committee.*

Incomplete applications will not be considered.

Mail completed application and other information to: GFWC Oviedo Woman's Club, ATTN: Scholarship Committee, P.O. Box 620522, Oviedo, FL 32762-0522.

Applicant's Name _____

APPLICATION
DUE MARCH 1, 2020

Please read carefully, and complete all items. To be accepted, this application must be typed or printed in black or blue ink.

I. PERSONAL INFORMATION

Name: _____

Email address: _____

Mailing address: _____

Residence address (if different): _____

Best telephone number: (_____) _____ Age: _____ Date of birth _____

Age: _____ Date of birth: _____

I am currently zoned for [indicate one]:

Hagerty High School

3225 Lockwood Blvd, Oviedo FL 32765

Oviedo High School

601 King Street, Oviedo FL 32765

I attend _____ High School in Seminole County

Your weighted Grade Point Average (G.P.A.)? _____
(Minimum 3.0 is needed to qualify for the OWC scholarship)

SAT score: _____ ACT score: _____
(If you have not taken SAT or ACT, please indicate "not taken")

Do you work in addition to attending school? If so, where? _____

Hours per week of work: _____ Annual income \$ _____

II. HOUSEHOLD/FAMILY PROFILE

Will you receive help from a family member or friend? _____

Expected yearly contributions to your continued education \$ _____

Parent(s)/legal guardian(s):

Mother: Name _____ Telephone number: _____

Father: Name _____ Telephone number: _____

The above information about my household/family is true and accurate.

Father/Stepfather/Guardian Signature

Mother/Stepmother/Guardian Signature

Applicant's Name _____

III. COLLEGE PLANS:

To which college(s) have you applied? (Attach additional sheets if necessary.)

Name of College	Have you been accepted?
	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Waiting to Hear
	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Waiting to Hear
	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Waiting to Hear

What field do you plan to study? _____

Are you eligible for a Bright Futures Scholarship? Yes No

If so, what level of scholarship? FL Academic FL Medallion Gold Seal Vocational

Other awards:

Please list below the name and amount of any grants, financial aid or scholarships that you have applied for or been awarded for the 2018-2019 academic year. (Attach additional sheets if necessary.)

Name of Award	Amount	Awarded?
		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Waiting to Hear
		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Waiting to Hear
		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Waiting to Hear
		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Waiting to Hear

IV. ACTIVITIES AND HONORS

Please list all activities, honors and volunteer history on a separate piece of paper and attach.

V. APPLICANT'S SIGNATURE

I wish to apply for a GFWC Oviedo Woman's Club scholarship. The information I have provided is true and accurate.

Signature of applicant: _____ Date: _____