



APPLICATION DEADLINE:
FRIDAY, MARCH 4, 2022
5:00 pm

TRADITIONAL SCHOLARSHIP APPLICATION

NAME: _____ PHONE NUMBER: _____

MAILING ADDRESS: _____
(Address) (City, State, Zip)

EMAIL ADDRESS: _____

PARENT/GUARDIAN NAME(S): _____
(Name(s) must match the name listed on applicant's high school transcript)

Is your parent/guardian a member of Lumbee River EMC? YES ___ NO ___
(Parent/guardian must be a member of Lumbee River EMC to be eligible for this scholarship)

NAME OF HIGH SCHOOL: _____

HIGH SCHOOL ADDRESS: _____
(Address) (City, State, Zip)

HIGH SCHOOL TELEPHONE NUMBER: _____

NAME OF YOUR GUIDANCE COUNSELOR: _____

WHICH ACCREDITED UNIVERSITY/COLLEGE(S) HAVE YOU APPLIED TO?

UNIVERSITY/COLLEGE NAME	LOCATION (CITY, STATE)	HAVE YOU BEEN ACCEPTED

WHAT WILL YOUR COURSE OF STUDY/MAJOR BE? _____

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ACADEMICS

(Attach official transcript as supporting documentation)

Class Ranking: Number _____ out of _____ in graduating class.

Cumulative GPA: _____ on a 4.0 scale **(unweighted)**

ACT Score: _____

SAT Score: _____

COMMUNITY AND SCHOOL ACTIVITIES

PERSONAL ACHIEVEMENT(S): Give years or membership, offices held and honor received.
(Non-school related activities including church and community)

ORGANIZATION	NUMBER OF YEARS	OFFICE(S)/HONOR(S) HELD

PERSONAL ACHIEVEMENT(S): List the activities participated in during high school.
(School related activities including class officer, plays, athletics, music, etc.)

ACTIVITY	NUMBER OF YEARS	REMARKS/HONORS

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NEED

Have you received a full-tuition scholarship to the school of your choice? YES ___ NO ___

PARENT/GUARDIAN(S) combined adjusted gross income: _____
(From previous years, Federal Income Tax Form)

Other Income (source & amount): _____
(Social Security, Disability, Child Support, etc.)

The following individuals are supported by my parent/guardian(s). I have noted their contribution to our family income.

NAME & AGE	PLACE OF EMPLOYMENT	INCOME AMOUNT

STATEMENT OF APPLICANT, PARENT/GUARDIAN

We have included all items requested and answered all questions. We understand that incomplete applications will not be considered. All financial and family information in this application will be held in strict confidence by cooperative employees and program judges. We have examined this application and the information is true, complete, and accurate to the best of our knowledge.

(Applicant signature here)

(Applicant's parent / guardian signature here)

(Date)

(Date)

Submit Completed Application and Documentation to:

Youth Programs Lumbee River EMC
PO Box 4210, Pembroke, NC 28372-4210
or via email to david.spencer@lumbeeriver.com

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STATEMENT OF FORFEITURE

I, _____, understand that at any time during the tenure of my
(print applicant name here) college attendance, should I discontinue attendance at an accredited institution, I will forfeit all of the remaining scholarship funds that I may have previously been entitled to receive.

(Applicant signature here)

(Applicant's parent / guardian signature here)

(Date)

(Date)

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APPLICATION JUDGING & GUIDELINES

Judging for scholarships will be based on:

- | | |
|------------------------------------|------|
| 1. Academics: (GPA) and class rank | 25 % |
| 2. 2. SAT/ACT Scores | 20 % |
| 3. School and Community Activities | 20 % |
| 4. Need | 20 % |
| 5. Personal Statement | 15% |

You must include the following with your application:

1. **Personal statement:** Write about why you seek this scholarship and how your school/community/work activities have influenced your goals and career choice. This statement should be no more than two double-spaced **typed** pages.
2. Original high school transcript including GPA, SAT or ACT scores and class rank.
3. Letter of recommendation from a school principal or guidance counselor.
4. Letter of acceptance from accredited universities or colleges you plan to attend in the fall.