

THE SALLIE SOUTHALL COTTEN SCHOLARSHIP <u>APPLICATION GUIDELINES</u>

This scholarship is awarded based on the candidate's character, scholastic records, evidence of intellectual promise, demonstration of ambition, leadership ability, and need for financial assistance.

- 1. Applicant must be a Garner area high school senior.
- 2. Applicant must be in the upper fourth of the class.
- 3. Applicant must use the official application form.
- 4. The scholarship is to be used at a four-year college or university in the state of North Carolina.
- 5. Applicant must be a citizen or permanent legal resident of the United States.

THE FOLLOWING MUST BE SUBMITTED

- Application form.
- Recent photograph.
- A personal letter as to why the student desires to continue their education, the student's future plans, and why financial aid is necessary.
- Letter of recommendation from either the school principal, school guidance counselor or a teacher.
- Letter of recommendation from a business or professional person other than school personnel.
- High school transcript with grades through the first semester of senior year, complete SAT and/or ACT scores, class rank with number of students in class, and grade point average weighted and unweighted.
- Applicant should be available for an interview with the Scholarship Committee at the Garner Woman's Club during the month of January 2024 and be available for presentation of the scholarship during the month of May 2024.

• Copy of most recent Federal Tax Returns of FAFSA Summary for applicant's parent(s) and applicant. Document any significant changes in family income if necessary. Student should mark out SSN before submission.

Deadline: January 10, 2025

Applicant will not be considered unless all required items listed above have been received by the deadline.

Mail or email all scholarship material to:

Mrs. Madison Wynands, Scholarship Chairwoman Garner Woman's Club PO Box 1112 Garner, NC 27529 womansclubgarner@gmail.com

GFWC-NC Sallie Southall Cotten Scholarship, Application Form

To Be Completed by Student

APPLICANT'S FULL NAME	Dete		_		
Date HOME ADDRESS					
BIRTH DATE PHONE (cell) APPLICANT'		PHOI	 NE		
1. School	Graduat	ion Date			
2. Name of Father/Guardian					
3. Address					
4. Name of Mother					
	Occupation				
6. How many persons are depende	nt upon your i	parents?			
7. Give ages of brother(s)		Sister(s)			
9. How many brothers	and/or sister	6	are in college?		
10. Name colleges					
11. Did your parents attend college			ther		
12. Do your parents own their own	home?	_ Buying?	Renting?		
13. What work for pay have you do	ne during the	last year?			
15. What work do you plan to do thi	s coming sum	nmer?			
16. What is your NC college prefere	ence				
17. What course of study will you ta					
18. Have you applied or been acce	pted for entra	nce to a college	e?		
19. Are you in need of financial ass	istance?				
20. Name other scholarships for wh	nich you have:				

21. Scholarship name and amounts you have received _____

22. If you are awarded this scholarship, how will the balance of your college expenses be financed?

23. Attach a list of extracurricular activities, honors and community activities.

PARENT OR GUARDIAN'S ENDORSEMENT

I (name) _____, the parent/guardian of the above applicant for a scholarship, hereby declare that, to the best of my knowledge, and belief, the foregoing statements are complete and correct. I approve the applicant's application for a scholarship.

Date		
Signature		