

Faith, Hope and Charity Recycle Store, Inc.
Attn: Scholarship Committee
449 Industrial Blvd., Suite 120
Ellijay, GA 30540

Scholarship Application Form

Date of application: _____ Date scholarship funds are needed: _____

Name _____ DOB _____

Home Address _____ Zipcode _____

Email address: _____ Home phone # _____
Cell # _____

Spouse's name (if married) _____

Parent's name(s) and Phone Numbers _____

Parent's place of employment _____

Number of years a Gilmer County resident _____

Total number living in household _____ Total number currently attending college _____

Household yearly income, including child support, food stamps, WIC, disability, TANF, SSI and any other income for all members of your household. _____

You **MUST** provide proof of family income. This may include a copy of parent's previous year's income tax return or year-end pay stubs from both parents. The same instructions to grandparents or other family members providing funding.

Name and location of college where you are currently enrolled

Date of first enrollment: _____ Expected date of graduation: _____

Major field of study _____ Current GPA _____

Include a copy of costs and expenses from the school. List all financial aid and scholarships you are receiving. This information is available from your school's financial aid office.

Other information:

This section contains a series of essay questions. Your answers allow the FHC Scholarship Committee to get to know who you are, what motivates you, your vision for yourself and your future, and why you want to further your education. Please answer all the questions thoroughly and limit your responses to the space provided.

1. What are your short-term and long-term goals? How do you plan to meet them? Describe the field of study you are interested in and why you chose this particular school.

2. How do you plan to finance your college education? State any special, personal or family circumstances affecting your need for financial assistance. Do you plan to work while attending school?

3. Who in your life is your role model or had the most influence on you? Why?

4. Discuss a local event, church program, or activity that you participated in and how it has impacted your life. How have you made a difference in your community?

5. What is your greatest strength? Tell us about your leadership experience.

Applicant must read and sign below to be eligible for consideration:

1. I certify that all information is complete and accurate to the best of my knowledge. I understand that any false information will cause me not to be eligible for scholarship funds.
2. I give my consent, in accordance with the Family Education Privacy Right Act, to allow financial or academic/enrollment information to be released to the FHC Scholarship Committee to be used to verify eligibility for scholarship funds.
3. **Mail** completed application to the address at the top of this form.

Applicant's signature: _____

Date: _____