



Sawnee Electric Membership Foundation 2019 Youth Scholarship Program Application

Eligibility:

To be eligible, the student must be a high school senior **and** his/her permanent residence must receive its electrical service from Sawnee EMC.

A perceived graduating GPA of 2.0 or above.

**Close relatives of SEMC employees, SEMC Directors, and CATF members are not eligible.

PLEASE READ OVER YOUR APPLICATION CAREFULLY AND CONFIRM THAT IT IS COMPLETE BEFORE YOU TURN IT IN. An incomplete application will automatically be rejected.

You may mail your completed application to:

**Sawnee Electric Membership Foundation
Attn: Cindy Badgett
P.O. Box 1174
Cumming, GA 30028**

The completed application and all other required documents must be received no later than 4:30 P.M. on Thursday, January 24, 2019. Application received after this deadline will not be considered.



DOCUMENTS THAT MUST BE PROVIDED WITH COMPLETED APPLICATION (Check boxes are provided in the margin for ease of completion.)

- Provide one certified transcript of grades from high school sealed in a school envelope. Please include a picture if one is not on your transcript.
- Must include 4 copies of the completed application.
- Provide a copy of one of the following:
 - ACT score of 15 or better
 - SAT score of 700 or better
- Attach a typed, double-spaced essay describing in 150 – 200 words your educational, career, and life goals. Include why you have chosen this goal and how you will give back to your community/society.
- In a typed, double-spaced essay, please explain how you plan to fund your college education and how this scholarship will assist you. State any special personal or family circumstances affecting your need for financial assistance. Provide expected tuition costs and any scholarships your college is offering. If attending college in Georgia, you will probably be eligible for the HOPE scholarship. If you are considering going out of state, please explain why.
- Submit two (2) letters of recommendation from non-family members. Please have them complete this recommendation on personal or work letterhead. Please have the person writing the recommendation letter include: how well, how long and in what capacity they know you, the applicant. The recommendations should be in a sealed and signed envelope and included with your application packet.
- Submit one (1) letter from a high school authority using the enclosed form on page seven (7) and eight (8).
- If not a United States citizen or permanent resident, please provide a certified copy of your student Visa.
- Applicants must be available for a personal interview if selected as a finalist.



SCHOLARSHIP CONDITIONS

Acceptance of funds by the recipient will constitute acceptance of the terms of the scholarship. They are as follows:

1. Scholarships must be used at a four-year college, a community college, a technical school or vocational school of the recipient’s choice provided that such school chosen is an accredited institution.
2. Scholarships will be announced and awarded in the spring prior to the recipient’s graduation.
3. The scholarship will be paid by the Foundation directly to the educational institution chosen by the scholarship recipient.
4. The scholarship judges will consider the following: scholastic achievement, character, leadership, volunteer service, career and life goals and any other pertinent information or circumstances that may heighten the need for this scholarship.

**Sawnee Electric Membership Foundation
2019 Youth Scholarship Program Application**

Name of Applicant: _____
Last First M.I.

US Citizen **Student Status Visa** **Permanent Resident**

Address: _____
Physical PO Address

City State County Zip Code

Telephone Number Cell Phone Number (is it Okay to text?)

Email Address Alternate Email



Name of Parent (Mother) _____
Last First

Address: _____
Physical PO Address

City State County Zip Code

Telephone Number Cell Phone Number (is it Okay to text?)

Email Address **Sawnee EMC Member Number**

Name of Parent (Father) _____
Last First

Address: _____
Physical PO Address

City State County Zip Code

Telephone Number Cell Phone Number (is it Okay to text?)

Email Address **Sawnee EMC Member Number**

Name of Legal Guardian: _____
Last First

Address: _____
Physical PO Address

City State County Zip Code

Telephone Number Cell Phone Number (is it Okay to text?)

Email Address **Sawnee EMC Member Number**

High School: _____

Address: _____
Physical

City State County Zip Code

Telephone Number Counselor's Name



All Scholarships Applied For:

| Name of Scholarship | Amount | Recieved | Denied | Unknown | Renewable (Y/N) |
|---------------------|--------|----------|--------|---------|-----------------|
| | | | | | |
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Use Additional Sheets of Paper if Needed – Please Type all Work

| Community & Extracurricular Activities (includes volunteer work) | Dates | Hours Per Week |
|--|-------|----------------|
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| Honors & Awards | Dates Received |
|-----------------|----------------|
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| Applicant's Employment History: (Most Recent First) | | | | |
|---|---------|---------------------|--|----------------|
| Employer | Address | Dates: From – To | | Hours Per Week |
| | | | | |
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The Decision(s) of the Scholarship Judges are FINAL.

I have reviewed the checklist provided on page two (2) of this document and I understand that an incomplete application will be automatically rejected.

If awarded, scholarship must be used within one year of receipt

Signature of Applicant

Signature of Parent or Guardian

Date



4. In comparison to other students whom you have known at comparable stages of their education, how would you rate the applicant in the following areas? If you are unable to evaluate an area, please leave it blank.

| | Excellent | Above Average | Average | Below Average |
|------------------------|-----------|---------------|---------|---------------|
| Seriousness of Purpose | | | | |
| Initiative | | | | |
| Maturity | | | | |
| Adaptability | | | | |
| Enthusiasm | | | | |
| Stability | | | | |
| Leadership | | | | |
| Public Speaking | | | | |

5. Please cite a specific example of how, in your association with the applicant, he or she has demonstrated the above qualities.

Signature

Title or Position

Date