



2016 SIGNATURE BRANDS SCHOLARSHIP APPLICATION

\$2,000 Scholarship

The following must be included with your application:

- Include a letter of recommendation. They can be from teachers, guidance counselor, administrator, employer or where you volunteered. Please include the person's name, address and phone number.
- 300 word essay on – Using one of the five core values above, write a three hundred word essay incorporating how this value(s) was instrumental in you achieving a goal or overcoming an obstacle. (see DESCRIPTION page)
- Minimum 3.00 unweighted GPA required. Completed Grade/Test report form.(See below)

One complete application packet; a packet includes application, grade/report form, and letter of recommendation, must be mailed or delivered by the **Deadline of Tuesday, April 5, 2016 at 5:00p.m.** to Foundation office at 1239 NW 4th St. Ocala, FL 34475

Failure to follow all of these requirements will result in your not being considered for a scholarship.

Student's Name: _____

Address with zip code: _____

Telephone: _____ Social Security #: _____

High School: _____ Birth date: _____

College you plan to attend: _____

College address with zip code: _____

GPA _____ SAT Score _____ and/or ACT Score _____ CPT

Scores: _____ Reading _____ English _____ Algebra

Career Goal: _____

Have you applied for any other scholarships? _____ Please list names and amount.

To date, have you received any other scholarship funding? Yes ____ No ____
If so, which scholarship(s) have you received?

Extra-Curricular Activities – Organizations, Clubs, Sports, Band, Chorus, Drama, etc. (please indicate any office held): _____

Honors and Awards: _____

Community or Other Activities: _____

Student's signature: _____ Date: _____

Submit your application, essay, letters of recommendation, & Grade/Test report form by **Tuesday, April 5th, 2016 at 5:00p.m. To:**

Public Education Foundation of Marion Co., Inc.
Thelma Parker Center, 1239 NW 4th St. Ocala, FL 34475 671-4167



2016
Scholarship Application Grade/Test Report

Student Name _____

School _____

Unweighted GPA _____ *Weighted GPA* _____ *Class Rank* _____

Highest SAT Composite score without Writing Scores _____

Highest ACT Composite score without Writing Scores _____

List all Honors/AP classes 9th-12th grade

Counselor's Name

Counselor's Signature

Date