
THE SUNSHINE STATE AMATEUR GOLFERS ASSOCIATION, INC.

GRADUATING SENIOR SCHOLARSHIP AWARD APPLICATION

Date of Application: _____

Name: (Please Print) _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ E-mail Address: _____

Date of Birth: _____ Age: _____ Gender: _____

Graduating High School: _____

GPA: _____ Class Rank: _____ Class Size: _____

Father's Name: _____ Occupation: _____

Place of Employment: _____

Mother's Name: _____ Occupation: _____

Place of Employment: _____

Number of Siblings at Home: _____ Ages: _____

Number of Siblings in College: _____

Yearly Family Income: (check one) ☐ under \$15,000 ☐ \$15,001–\$25,000

☐ \$25,001–\$35,000 ☐ \$35,001–\$50,000 ☐ above \$50,001

Are You Employed? ☐ Yes ☐ No

If so, where? _____ Position: _____

(Please type or print in blue or black ink only)

School Activities:

Years Involved:

Name and/or Office Held:

Community Activities:

Years Involved:

Name:

Honors & Awards:

Years Involved:

Name:

Sports Activities:

Golf: _____ Handicap: _____

Basketball: _____ Position: _____ Points: _____

Football: _____ Position: _____ Years: _____

Others: _____

Scholarships / Grants / Loans Applied for During the 20__–20__ School Years (check all that apply):

- ☐ Pell Grant ☐ Florida Student Grant ☐ Bright Futures ☐ Florida Academic Scholar
☐ Florida Gold Seal ☐ Florida Medallion Scholar
☐ Other (please specify) _____

Scholarship(s) Previously Awarded:

Colleges Applied to and Acceptance Approval:

Attach an Essay of at least 500 words indicating your career objectives and plans upon graduating from high school. Please type and double space.

Any Student may apply regardless of color, creed, race, religion, national origin, or gender.

–S.S.A.G.A. is a 501(c)(3) designate.

Application Deadline: April ____ 2010

Please mail application to:

Sunshine State Amateur Golfers Association

Attn: Harry Stanfield

5333 SW 133rd Ave. Miramar, FL 33027
