

## **Scholarship Guidelines**

In order to qualify for the 2010-2011 DeBartolo Family Foundation Scholarship, all applicants MUST:

| Be a current high school senior in Florida's Hillsborough, Pasco, Pinellas or Polk counties.          |
|---|
| Graduate in May 2011.   |
| Have plans to continue his or her education at a University, Community College or Technical           |
| School starting in summer or fall of 2011.  |
|   |
|   |
| Checklist for Submission  |
|   |
| Completed and signed DeBartolo Family Foundation Scholarship Application.                             |
| Principal, Vice Principal or Guidance Counselor Signature.  |
| Maximum 250 word essay, summarizing personal and academic achievements.                               |
| Page 1 of applicant's parent or legal guardian's Federal Income Tax Returns from the                  |
| previous <b>TWO</b> years. Please DO NOT send applicant's W-2 forms, as these are not a               |
| representation of overall household income.   |
| Mail completed scholarship application including essay and required tax information                   |
| postmarked by April 1, 2011 to: DeBartolo Family Foundation, 15436 N. Florida Avenue,                 |
| Suite 200, Tampa, FL 33613.   |
| <b><u>DO NOT</u></b> send applicants awards, grades, transcripts, additional references or letters of |
| recommendation. These items will be discarded and will have no impact on scholarship                  |
| recipients.   |
| -   |

#### **Decisions**

All final scholarship authority resides with the Board of Directors of the DeBartolo Family Foundation. Scholarship winners will be notified by certified mail.



# Scholarship Application: For current high school seniors in Florida's Hillsborough, Pasco, Pinellas or Polk counties attending college in Fall 2011 as a first time in college student.

Please type or print. All portions of this application must be completed.

| Applicant Name First:   | Middle:                      | Last:                       |   |
|---|------------------------------|-----------------------------|---|
| Address:  | City:                        | State:                      | Zip:  |
| Telephone: (  | Birth date:                  | SS #:                       |   |
| Cell Phone: (   | Email:                       |                             | <u> </u>                                    |
| High School Attended:   | Start Date:                  | Diplom                      | a date:                                     |
| School Address:   | City:                        | State:                      | Zip:  |
| Date you plan to enter college:   |                              |                             |   |
| COLLEGE PLANS   |                              |                             |   |
| Course of study you plan to follow (sh  | Accepte Yes/No               |                             |   |
|   | ,                            |                             |   |
|   |                              |                             |   |
| What other scholarships have you rece<br>one-time scholarship or annual.) (Use<br>Name of Scholarship | separate sheet if necessary) | rards along with dollar amo | ount. (Indicate if it is a  Amount Received |
|   | \$                           |                             | \$  |
|   | \$                           |                             | \$  |
|   | \$                           |                             | \$  |
| T   | otal scholarship monies rece | ived to date                | \$  |

## **FAMILY INFORMATION**

| Name of parent(s) or guardian:                                   |     |                        |                   |                        |
|--|-----|------------------------|-------------------|------------------------|
| Address:   | C   | City:                  | State:            | : Zip:                 |
| Address if different from Applicant                              |     |                        |                   |                        |
| Telephone: (   |     |                        |                   |                        |
| Father's Employer:   |     |                        | Work Phone: (     |                        |
| Position/Title:  |     |                        | _ Cell Phone: (   |                        |
| Email:   |     |                        |                   |                        |
| Address:   |     | _ City:                | Sta               | te:Zip:                |
| Mother's Employer:   |     |                        | _ Work Phone: ( _ |                        |
| Position/Title:  |     |                        | Cell Phone: (     |                        |
| Address:   |     | City:                  | State             | e:Zip:                 |
| Email:   |     |                        |                   |                        |
| Total household annual income: \$                                |     |                        |                   |                        |
| Please attach page 1 of your paren <u>TWO</u> years. Application | O   |                        |                   | -                      |
| List other children in family below:                             |     |                        |                   |                        |
| Name   | Age | Attending Colle Yes/No | ege? Planı        | ning to Attend? Yes/No |
|  |     |                        |                   |                        |

## **ESSAY**

| raining/part-time work. (Attach a separate   | sheet if necessary.)                                     |                        |  |                            |
|--|--|------------------------|--|----------------------------|
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
|  |  |                        |  |                            |
| CERTIFICATION  certify that I am a U.S. citizen or lawful poenior in good standing. All requested tax forrect to the best of my knowledge. | ermanent resident (alien #<br>forms and references are e | nclosed and the inform | ) and am currently a hation I have submitted | nigh school<br>is true and |
| pplicant Signature   | Date   |                        |  |                            |

#### **REFERENCES:**

completed only after you have completed the entire application and should be included with your application. DO NOT MAIL SEPARATELY. Applicant/Student's Name: Address \_\_\_\_\_ State \_\_\_ Zip \_\_\_\_ Student GPA \_\_\_\_\_ Student ranks in a graduating class of students. In character, personality, school citizenship, development, conduct and leadership, how would you classify this student? Top 10% of the class \_\_\_\_\_ Average \_\_\_\_\_ Below average Did applicant receive any special recognition for school activities? If so, please explain. Anything additional you feel would qualify this student for scholarship consideration? I certify that the information contained herein is correct to the best of my knowledge. I also certify that the data related to scholastic performance is from a current and official transcript. **Application Checklist** Signature Completed Application, Signed by Student (Page 3) Principal, Vice Principal or Guidance Counselor Signature (Page 4) Title Copy of Federal Income Tax Return (Page 1 of Tax Form) from the last two years. Completed Essay Date

This part is to be completed by your high school Principal, Vice Principal, or Guidance Counselor. This part should be

Application & all required attachments together must be postmarked by April 1, 2011 to:

DeBartolo Family Foundation Scholarship 15436 N. Florida Avenue, Suite 200 Tampa, FL 33613 813-964-8302

PLEASE DO NOT SEND TRANSCRIPTS OR GRADES