

Beatrice Christine Williams Memorial Scholarship Fund Application

Please **type** or **print** your answers. If application is illegible it will not be considered.

1.	Last Name: _____	First Name: _____	
2.	Mailing Address: Street: _____ City: _____ State: _____ ZIP: _____		
3.	Daytime Telephone Number: () _____		
4.	Date of Birth: Month _____ Day _____ Year _____		
5.	Current School: _____	Number of years attended: _____	Premier Moms Member Yes _____ No _____ Membership #: _____
6.	I will be attending the following school /post-graduate program in the <u>Fall of 2021</u> : _____ Proof of acceptance or current student enrollment from the above school is required prior to receipt of funds .		
7.	I will be entering the above-mentioned school as a: (Circle one) Freshman Sophomore Junior Senior Trade School Student Entrepreneur		
8.	Grade Point Average (GPA): _____ (On a 4.0 scale) Attach proof of GPA. Your most recent official school transcript required.		
9.	Name and city of other schools attended: _____	Number of years attended: _____	
10.	What specialty/major do you plan to major in as you continue your education?		
11.	What are your educational and professional goals and objectives?		
12.	List your academic honors, awards and membership activities while in high school or college:		
13.	List your community service activities, hobbies, and outside interests.		

14.	<p>A. The following items must be attached to this application in order for the application to qualify to be reviewed by the scholarship committee.</p> <p>B. Your application will not be accepted for review if these items are <u>not</u> attached to this application. (No exceptions.)</p> <p>C. Circle "YES" or "NO" to be sure you have attached each item as required.</p>		
	YES	NO	Two (2) reference letters. Return these completed letters in sealed envelopes from your teacher, guidance counselor, mentor, etc.
	YES	NO	Proof of college or program acceptance or enrollment. A letter of college acceptance or program acceptance is required for receipt of funds. This can be submitted once received – mark as Pending
	YES	NO	Most recent official transcript. Photocopies of your transcript are <u>not acceptable</u> .
	YES	NO	Personal Letter explaining why you should be selected for the BCW Scholarship.

STATEMENT OF ACCURACY

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that my picture may be taken and used for any purpose deemed necessary to promote the scholarship program.

I hereby understand that if chosen as a scholarship winner, according to **Beatrice Christine Williams Memorial Scholarship Fund** policy, I must provide evidence of enrollment/registration at an institution of my choice before scholarship funds can be awarded.

Signature of scholarship applicant: _____ Date: _____

Checklist

- ___ Two Letters of Reference
- ___ Acceptance Letter or Proof of Enrollment in College/University or Trade School
- ___ Official Transcript
- ___ Personal Letter

MAIL COMPLETE APPLICATION PACKAGE TO THE FOUNDATION AT:

BEATRICE CHRISTINE WILLIAMS MEMORIAL SCHOLARSHIP FUND
POST OFFICE BOX 261
ARCHER, FL 32618
Phone#: (904)326-0261

REMINDER:

The deadline for this application to be received by the Beatrice Christine Williams Scholarship Fund is:

Date: May 31, 2021

NO EXCEPTIONS

The **Beatrice Christine Williams Memorial Scholarship Fund** awards scholarships to single mothers who have a financial need in Alachua, Levy and Marion Counties to build a new future for their families. The Beatrice Christine Williams Memorial Scholarship Fund supports both part-time and full-time single-parent students pursuing an education, including associate's degrees, bachelor's degrees, and certificate programs.

1. DEADLINE for scholarship application is **May 31, 2021**
2. Refer to criteria below for eligibility requirements.
3. Refer to application process below for a list of the supporting documents needed (i.e., letters of reference, evidence of GPA, etc.) *Incomplete applications will not be considered.*
4. If any question does not apply to you in this application, please put N/A in the space.
5. Type or print legibly. *Illegible applications will not be considered.*
6. You will be notified by mail or email in **June** regarding the status of your application.
7. If you have any questions about the application, please email bcwmemorialscholarshipfund@gmail.com or contact by phone at (904) 326-0261.

NOTE: Scholarship funds will be awarded to the college, university, or program upon evidence of registration. The Beatrice Christine Williams Memorial Scholarship Fund will handle all deposits of funds to your college, university, or program.

Purpose: To provide a single year scholarship to a single mother interested in or intending to pursue a course of study at either a college/university or other post-secondary educational institution.

Award Components: One \$500 scholarship will be awarded for distribution each year to one single mother selected by the Beatrice Christine Williams Memorial Scholarship Fund Committee.

Application Process:

Applicant must submit the following items:

1. Completed application form (if handwritten, please print legibly)
2. Two letters of recommendations from choice of teacher, mentor, administrators, counselors, employers, or individual with significant knowledge of applicant's experience and involvement.
3. An official transcript with cumulative grade point average.

Criteria:

To be eligible for the Beatrice Christine Williams Memorial scholarship, you must meet the criteria listed below.

- You live in the state of Florida in Alachua, Levy or Marion County.
- You meet the following definition of "single parent" (all 3 categories)
- Marital status: You're single (never married, widowed, divorced, legally separated).

- Parenting Status: You're the custodial parent or guardian with physical custody (50% or more) of at least one dependent child. A dependent child is 18 or younger, older than 18 and still in high school, or a severely disabled adult living with and dependent on you.
- Living status: You're the only adult in the home with the child(ren), you live with parents or relative(s), or you live with a roommate who is not your partner, significant other, or a co-parent.
- You're a legal resident of the United States (or a resident with DACA status), applying in the county where you live.
- You've earned a high school diploma or GED.
- You have at least a 3.0 cumulative GPA.
- You're pursuing a degree or certification that leads to employment at family-supporting wages, or entrepreneur seeking to start a business.