

Virgil and Virginia Schenck Foundation

(A 501 (c) (3) Charitable Foundation)

55 McLeod Street, Merritt Island, FL 32953

Phone (321) 735-4900 Fax (321) 735-4901

e-mail: ella@schenckfoundation.com

- Directors -

Jay G. M. Schenck • John L. T. Schenck • L. Virgil Schenck, IV

This offers the successful candidate scholarship money for two years at a state community college and up to \$20,000 for four years period at an accredited four-year Florida public college or university

1. Must pursue an A.A. or an A.S. degree from a state community college, and a B.S. or B.A. degree from a four-year state college.
2. Must take a minimum of 12 credit hours per session.
3. Must make available to the Foundation your grades when requested.
4. Must complete the Foundation Scholarship Application, and with the application submit a 100 word or more statement of your future goals. Include in this statement the reason you want to go to college.
5. Must appear before the Scholarship Committee for an interview, if requested.

Student will be notified by mail, and upon this notification the student will provide the Foundation with proof of enrollment in a college. Funds will be sent directly to the college. A copy of the submittal letter and checks will be sent to the student.

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Application
Student Personal Data for Scholarship
Confidential

1. Full Name: _____

Address: _____

Telephone Number: () _____ Date of Birth: _____ Marital Status: _____

Social Security Number: _____ Sex: Male: _____ Female: _____

2. High School: _____ Date of Graduation: _____
(An official copy of High School transcript must accompany application)

List three colleges you are 1) _____ (Location) _____
considering:

(In order of preference) 2) _____ (Location) _____

3) _____ (Location) _____

Date of Enrollment or Anticipated Enrollment in college: _____

Major: _____ Minor: _____

3. Father's Name: _____

Address: (if different from yours) _____

Telephone Number: (Home) () _____ (Work) () _____ Annual Income: \$ _____

Mother's Name: _____

Address: (if different from yours) _____

Telephone Number: (Home) () _____ (Work) () _____ Annual Income \$ _____

4. Number of brothers and sisters living at home under age 18: _____

Number of brothers and sisters attending a College/University: _____

5. How do you plan to finance your education: _____

6. Lists other sources of Financial Aid you are receiving, will receive; or applied for:

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

7. References (i.e., Church, Community Leader, School official):
(Please attach letter of recommendation for each reference)

Name: _____ Relationship: _____

Address: _____

Telephone Number: (Home) () _____ (Work) () _____

Name: _____ Relationship: _____

Address: _____

Telephone Number: (Home) () _____ (Work) () _____

Name: _____ Relationship: _____

Address: _____

Telephone Number: (Home) () _____ (Work) () _____

8. List Service/Social Organization you belong to: (i.e., School Clubs, Sports, Music, Extra Curricular Activity) -
List if held an officership

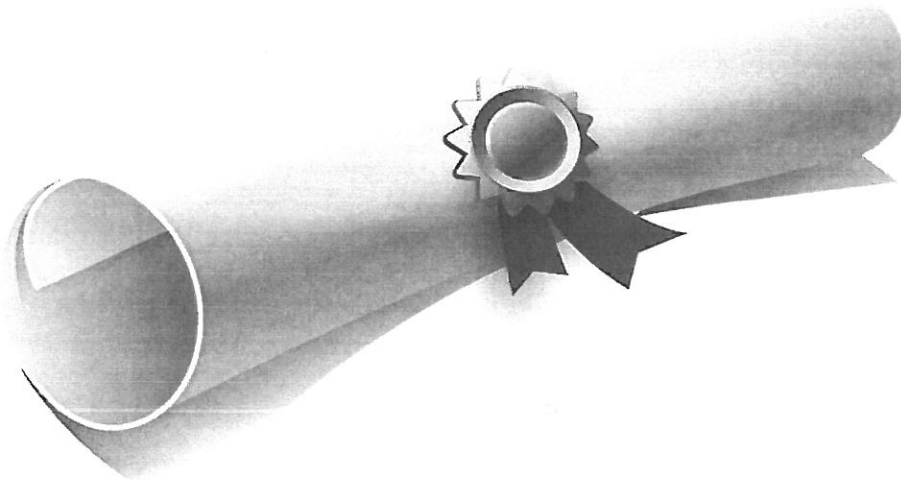
9. Please submit a handwritten statement of 100 words or more of your future goals. Include in this statement the reason you want to go to college.

By executing this application, I hereby authorized the members of the Scholarship Committee to contact any educational institution I attended, and or references for the purposes of verifying the provided data and for purposes of obtaining additional information.

I also certify that the information provided in this application is current and true to the best of my knowledge and belief.

Signature of Applicant _____ Date: _____

Signature of Parent or Guardian _____ Date: _____



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