



SELECT CARES FAMILY SCHOLARSHIP APPLICATION

Instructions:

1. Complete one applications for each scholarship
2. Form must be typed - All requested documents must accompany this application
3. The student must be a child of a current employee/agent at any Select Group affiliated company
4. Student must have a minimum GPA of 3.0 and provide an official transcript as proof
5. Provide a written essay describing your academic achievements, extracurricular activities, and future goals

Personal Information of the Applicant:

Applicant Name: _____ Parent/Guardian: _____
 Home Address: _____
 City: _____ State: _____ Zip: _____
 Contact Phone: _____ Email: _____
 What Company is the Parent/Guardian affiliated with? _____ City: _____

Academic Information for Applicant:

High School Attending: _____ Expected Date of Graduation: _____
 Current GPA: _____ Intended Major: _____
 Which do you plan to attend? 4 Year University Junior College Vocational School
 How many credit hours are you taking? _____

Yes No *I certify that the statements and information herein are true to the best of my knowledge and grant my permission for the information contained herein to be shared with the scholarship selection committee(s) and donor(s)*

_____	_____	_____
Applicant Name	Applicant Signature	Date
_____	_____	_____
Parent/Guradian Name	Parent/Guradian Signature	Date