

The J. Leroy Cook Memorial Scholarship Program

Scholarship Application 2010

HOW TO APPLY FOR THE SCHOLARSHIP

1. Complete the Personal Data portion of this application.
2. Complete the School and Community Extra-Curricular Activities page of this application.
3. Submit a complete copy of your FAFSA (Free Application for Federal Student Aid) form.
 - Provide information about any financial scholarships, grants or other awards for which you have applied or received.
 - Provide other financial information you wish to be considered on the financial addendum form with this application.
4. Distribute the reference forms included with this application. The completed application must contain at least one Personal Reference Recommendation and one Counselor/Teacher Recommendation.
 - If preferred, your references may seal the completed form in an envelope and mail separately to the address shown below.
5. Request and obtain an official copy (must have raised seal or notarization) of your high school academic transcript (**current college students should obtain college AND high school transcripts**).
 - Be sure that a copy of your latest SAT/ACT scores are listed on the transcript or submitted separately.
6. Once you have completed items 1 through 5 above, mail your application to:

The J. Leroy Cook Memorial Scholarship Program
Scholarship Selection Committee
P.O. Box 118
Mount Mourne, NC 28123

Any item that will be sent by separate mail should be noted in your application.

Please type or neatly print your information.

The J. Leroy Cook Memorial Scholarship Program

PERSONAL DATA

1. Name (Please print): _____
(Last) (First) (Middle Initial)

2. Date of Birth: _____
(mm/dd/yyyy)

3. E-MAIL Address: _____

4. Parent Employed by Case Farms: _____
(Last) (First) (Middle Initial)

5. Parent's Work Location / Department: _____
(City & State) (Department)

(Job Title) (How long worked for Case?)

6. Permanent Mailing Address: _____
(Street, Box, or Route No.)

(City/Town)

(State) (County) (Zip Code)

(Telephone Number)

7. High school from which you will graduate (or college currently attending):

8. Address of school: _____
(Street) (City & State) (Zip Code)

9. (For high school seniors) College/University in which you have enrolled or plan to attend:

10. Address of school: _____
(Street) (City & State) (Zip Code)

The J. Leroy Cook Memorial Scholarship Program

PERSONAL DATA (continued)

11. What will be your college grade level when you begin the 2010-2011 school year?

- 1st year/never attended college
- 2nd year/sophomore
- 3rd year/junior
- 4th year/senior

12. Intended College Major/Career Goals: _____

13. List any current and previous employment (if applicable):

Employer	Position	Dates Worked

14. If you listed jobs in question 13, what motivated you to work and what did you learn?

15. Do you plan to work while attending college? Why or why not?

The J. Leroy Cook Memorial Scholarship Program

OTHER FINANCIAL AWARDS

Please list details of any scholarships, grants or other financial awards for which you have applied or have already received. Be sure to indicate the status of the award, including decision time frame.

Award Name	Award Status (Applied/Received)	Expected Decision Date	Amount

The J. Leroy Cook Memorial Scholarship Program

FINANCIAL INFORMATION ADDENDUM

Please list details of any supplemental income or expenses that you wish to be considered when evaluating your financial need status. A section is also provided below to write any explanation for items listed or special circumstances.

Financial Item	Owner (Student/Parent)	Amount

I affirm all the information that I have provided on this application, or any supportive materials, is complete, accurate, and true to the best of my knowledge. I understand that furnishing false information may result in my application not being considered or revocation of financial aid at some later date.

Signature of Applicant _____ Date _____

Signature of Parent _____ Date _____
 (If applicant is under 18 years of age)

The J. Leroy Cook Memorial Scholarship Program

PERSONAL REFERENCE RECOMMENDATION

This form is required from all J. Leroy Cook Memorial Scholarship applicants' selected personal references.

Student's Name _____

Personal Reference Printed Name _____

I have personally known this student for _____ years as his/her _____
(Minister, teacher, mentor, employer, etc.)

This evaluation is based on: (Select all that apply)

Personal Knowledge Contact with Family

Please select the appropriate rating for each trait:

ON A SCALE FROM 1 TO 5, WITH LOWEST RATING = 1 AND HIGHEST RATING = 5.

TRAITS	Rating
Motivation	
Discipline	
Growth Potential	
Initiative	
Attitude	
Enthusiasm	
Leadership	
Character	
Self Confidence	

Please add any personal remarks below or attach a separate sheet to this form.

Signature of Person Recommending Applicant _____

Phone Number _____ Date _____

The J. Leroy Cook Memorial Scholarship Program

COUNSELOR/TEACHER RECOMMENDATION

This form is required from all J. Leroy Cook Memorial Scholarship applicants' selected school counselor, teacher or principal references.

Student's Name _____

Reference Printed Name _____

School Name _____

I worked with this student for _____ years.

This evaluation is based on: Personal Knowledge Contact with Teachers Records Only

In comparison to other students at this school, this applicant's course selection is:

(Select one) Average Demanding Most Demanding

Please select the appropriate rating for each trait:

ON A SCALE FROM 1 TO 5, WITH LOWEST RATING = 1 AND HIGHEST RATING = 5.

TRAITS	Rating
Academic Motivation	
Academic Discipline	
Growth Potential	
Energy and Initiative	
Attitude	
Enthusiasm	
Self Confidence	

Please add any personal remarks below or attach a separate sheet to this form.

Signature of Person Recommending Applicant _____

Phone Number _____ Date _____