

# Charlie Baker Scholarship Application

For consideration for the Dr. J F Burney Scholarship, you MUST complete all sections:

- Student Section
- School Section
- Student and Civitan Member Section

## STUDENT SECTION:

### School Information

If you are chosen as a scholarship recipient, the money must be used within one school calendar year. Please list the session in which you will be using your scholarship to assist in the payment of school expenses.

Fall Session \_\_\_\_\_ Spring Session \_\_\_\_\_ Summer Session \_\_\_\_\_

What will be your classification? \_\_\_\_\_ Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior \_\_\_\_\_ Graduate Student

Educational Plans:

At: \_\_\_\_\_  
College/University Street Address

City State ZIP Code

### Applicant Information

Full Name: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

City State ZIP Code

Home Phone: ( ) \_\_\_\_\_ Student ID Number: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_ Widowed \_\_\_\_\_ Divorced

Number of Children: \_\_\_\_\_ Ages : \_\_\_\_\_ Number in household currently attending college : \_\_\_\_\_

### Academic Data

Explain in detail your career plans/goals. (Attach additional pages if necessary).

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Degree you expect to receive (Associates, Masters, etc.) \_\_\_\_\_

**Work Experience**

Please list your work experience. Attach a sheet if necessary.

Employer	Dates	Income	Address
Details: _____			
_____			
_____			
_____			

**Personal Statement**

Briefly state why you need this financial assistance. (Attach additional pages if needed.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Briefly state why you think you are deserving of this scholarship. (Attach additional pages if necessary.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List other scholarship and / or grants for current academic year:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

# SCHOOL SECTION:

## THIS SECTION MUST BE COMPLETED BY:

Director of Admissions, Academic Dean, Department Head  
or other academic official able to render first Hand information  
on the candidate's application

School in which scholarship applicant is enrolled: \_\_\_\_\_

Concentrations: \_\_\_\_\_ Major \_\_\_\_\_ Minor: \_\_\_\_\_

What is applicant grade point average? \_\_\_\_\_ On what scale? \_\_\_\_\_  
(Note: Required minimum 2.5 GPA for this scholarship)

Has applicant ever been on academic probation? \_\_\_\_ Yes \_\_\_\_ No

How would you rate the applicant academically? \_\_\_\_ Superior \_\_\_\_ Good \_\_\_\_ Average \_\_\_\_ Below Average

Do you recommend approval? \_\_\_\_\_ Yes \_\_\_\_\_ No

On what do you base your recommendation?

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Remarks: \_\_\_\_\_

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Signature: \_\_\_\_\_ Title: \_\_\_\_\_

School: \_\_\_\_\_ Date: \_\_\_\_\_

City: \_\_\_\_\_ State/Zip Code \_\_\_\_\_ Contact Number: \_\_\_\_\_

# STUDENT and CIVITAN MEMBER SECTION:

**Student – Must request interview for sponsorship**

**Civitan Member – Must conduct interview and make recommendation**

Deadline: March 1

Date: \_\_\_\_\_

I hereby apply for sponsorship in making application for a scholarship awarded by the Valley District Civitan Foundation, Inc. To assist in payment of my educational expenses during the period listed below.

Fall Session \_\_\_\_\_ Spring Session \_\_\_\_\_ Summer Session \_\_\_\_\_

Full Name: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #  
\_\_\_\_\_  
City State ZIP Code

I respectfully request an interview with a designated representative of your club for purpose of elaborating on the information contained herein at your convenience.

I am now enrolled or plan to enroll as a student at \_\_\_\_\_

I will be classified as a \_\_\_\_\_ Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior \_\_\_\_\_ Graduate

I am planning a career in the following area:

\_\_\_\_\_

Please explain your present field of study:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**This section must be completed by the president or designated representative of the sponsoring senior club.**

I have interviewed \_\_\_\_\_ on \_\_\_\_\_ (Date).

To the best of my knowledge the applicant is a good citizen and worthy of consideration for this scholarship.

The \_\_\_\_\_ Civitan Club recommends serious consideration of this application.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

### CHECKLIST for COMPLETION

Before submitting your application for consideration, be sure you have completed the following sections:

- \_\_\_\_ Student Section Completed
- \_\_\_\_ School Section Completed
- \_\_\_\_ Student and Civitan Member Section Completed

With all sections completed, mail your application to:

**LeRoy Parks**  
**1853 Madison Street, Unit 1**  
**Clarksville, TN 37043**

**DEADLINE: March 1**