

Dr. J F Burney 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).

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?

Remarks: _____

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