

**COLUMBIA COUNTY MERCHANTS ASSOCIATION
SCHOLARSHIP FUND PROGRAM
2018**

The Columbia County Merchants Association Scholarship has been established by the association to recognize two outstanding seniors from the Columbia County School System. The Scholarships (amount to be determined) will be awarded to two deserving and qualified seniors from the Columbia County School System.

Guidelines

DESCRIPTION OF SCHOLARSHIP

The Scholarship would be provided to deserving students of the public high schools of Columbia County.

ADMINISTRATORS

The Administrators of the Columbia County Merchants Association Scholarship Fund Program shall be the Columbia County Merchants Association.

SELECTION COMMITTEE

A selection committee will govern the criteria for selection, publish information about the scholarship, and determine the students awarded the scholarships. This committee shall determine the number and amounts of scholarships to be awarded each year. This would be based on information received from the Administrators.

CRITERIA FOR SELECTION

The Selection Committee shall include the following criteria in determining the recipients of the scholarships:

1. That the applicant has satisfactory academic achievement. This is to be determined by reviewing transcripts and grade point average of the applicant.
2. That the essay of the applicant will be reviewed for clarity, sincerity, and interest indicated in attending college.
3. That references reviewed and evaluated indicate scholarship, diligence, and social skills.
4. That the applicant is accepted for enrollment in an accredited college or university in the State of Georgia.

Selection Committee:

The Selection Committee will meet during the spring of the year. All applicants will be notified of the results within ten (10) school days of the committee meeting.

**COLUMBI COUNTY MERCHANTS ASSOCIATION
SCHOLARSHIP FUND PROGRAM**

**COLUMBIA COUNTY MERCHANTS ASSOCIATION
Ted Lane
4382 Hardy McManus Road
Evans, Georgia 30809**

Scholarship Application

2018

APPLICATION DEADLINE: April 11, 2018

Eligibility:

Students who apply for this scholarship should fit the following criteria:

1. Be a graduate of one the public high schools of Columbia County;
2. Be a legal resident of Columbia County for a minimum of 12 consecutive months immediately preceding graduation;
3. Be accepted for enrollment in an accredited college or university in the state of Georgia;
4. Show evidence of outstanding academic achievement as evidenced by achievement test scores and by grade point average;
5. Show promise of continued academic achievement as evidenced by SAT/ACT scores.

REQUIREMENTS:

The student will provide his/her guidance counselor a complete packet of the following forms by **Friday, March 23, 2018**. The guidance counselor will send this packet to the Columbia County Merchants Association on **Tuesday, March 27, 2018**. **(Must be received by Merchants Association by April 11, 2018)**.

COLUMBIA COUNTY MERCHANTS ASSOCIATION

Ted Lane

4382 Hardy McManus Road

Evans, Georgia 30809

1. Pages 4 and 5 - *General Application Form*. Print or type all data being careful to complete each section.
2. Page 6 - *College Acceptance Data Form*. This form verifies acceptance, cost and financial aid data. The form should be completed and signed by the senior guidance counselor. Counselors April obtain this information via phone conversation with college admissions office.
3. Page 8 and 9 - Two (2) completed *Reference Questionnaires* (one from an educator and one from a person not in education who has observed the student in activities such as scouts, 4-H, church, work, etc.) These completed references should be submitted to the senior guidance counselor in sealed envelopes and should not be seen by the applicant.

All other forms must be returned as a packet to the Guidance Counselor.

5. A copy of *high school transcript* with GPA and SAT or ACT score highlighted. GPA is to be calculated through the first semester of current school year.
6. A one-page, double-spaced, typed *essay* outlining the student's career and educational goals. The applicant should indicate why he/she should be awarded a scholarship. The applicant's name and social security number should be located in the top right corner of the essay.

The Selection Committee will not consider incomplete, late, or incorrectly submitted applications. It is the student's responsibility to determine whether the application is complete.

**COLUMBIA COUNTY MERCHANTS ASSOCIATION
SCHOLARSHIP FUND PROGRAM
2018 SCHOLARSHIP APPLICATION**

Name: _____ Date: _____
(Social Security Number-Last 4 Digits)

High School: _____ Class of: _____

Address: _____ Phone No. _____

Father's Name: _____ Age: _____ Phone No. _____

Address: _____ Marital Status: _____

Occupation: _____ Company: _____

Mother's Name: _____ Age: _____ Phone No. _____

Address: _____ Marital Status: _____

Occupation: _____ Company: _____

Planned college major: _____

- Colleges accepted by:
1. _____
 2. _____
 3. _____

FOR PROGRAM USE ONLY

1. **Application:** _____
2. **College Data Verification Form:** _____
3. **References:** _____
4. **Transcript with SAT or ACT score:** _____
5. **High School GPA:** _____
6. **Essay:** _____

Columbia County Merchants Association Scholarship Application for 2018 (continued)

Applicant's Name: _____
(Social Security Number-Last 4 Digits)

Please do not be brief. Use reverse side and/or additional paper.

Honors and Awards

Extracurricular Activities:

Leadership Position - School Related

ORGANIZATION	YEAR	OFFICE HELD
_____	_____	_____
_____	_____	_____
_____	_____	_____

Leadership Positions - Church/Civic

ORGANIZATION	YEAR	OFFICE HELD
_____	_____	_____
_____	_____	_____
_____	_____	_____

**COLUMBIA COUNTY MERCHANTS ASSOCIATION
SCHOLARSHIP FUND PROGRAM**

College Acceptance Data Form

Student's Name

(Social Security Number-Last 4 Digits)

High School

I have verified the following information:

1. Name of Institution: _____
2. Date Student Accepted: _____
3. Estimated Tuition Cost for 2018-2019 Year: _____
(per year) (per term)
- *4. Estimated Scholarship Offered: _____
- *5. Other Financial Aid Offered: _____
6. Date Fall Term Begins: _____

*If not determined, state unknown.

(Signature of Guidance Counselor)

(Date)

(Signature of Student)

**COLUMBIA COUNTY MERCHANTS ASSOCIATION
SCHOLARSHIP FUND PROGRAM
2018
Scholarship Acceptance Agreement**

Recipient: _____ Scholarship Value: _____

I accept the scholarship funds provided by the Columbia County Merchants Association Scholarship Fund Program. I understand that I must comply with the conditions listed below in order to qualify for the funds.

- A. I plan to enter _____ during the _____ term.
- B. I plan to study/major in _____.
- C. I must make satisfactory academic progress, as defined by the institution I attend, and have no record of disciplinary problems.
- D. I agree to correspond with the program at least twice during the school year.
- E. I must provide the program with an **official transcript** of my grades at the end of each term. I understand that my grades must not fall below 3.0. I understand that failure to provide these grades will terminate my scholarship.
- F. If I transfer or withdraw from college, I will immediately notify the program.
- G. I understand that all scholarship payments will be made directly to the college.
- H. I must provide the program with any correct school mailing address.
- I. I realize that I must be a full-time student as defined by the institution I am attending in order to remain on scholarship.

Date

Signature of Recipient

Signature of Parent/Guardian

Recipient's Home Mailing Address

Recipient's School Mailing Address

**COLUMBIA COUNTY MERCHANTS ASSOCIATION
SCHOLARSHIP PROGRAM**

**Ted Lane
4382 Hardy McManus Road
Evans, Georgia 30809**

Reference Questionnaire

Student's Name

Social Security Number (Last four Numbers)

This is a private communication to be received by the Columbia County Merchants Association Scholarship Program. The students should not see the completed evaluation. The evaluation should be postmarked before **April 9, 2018**. Please evaluate the candidate on all fifteen factors listed below. Check only one choice for each factor that best describes the qualities of the applicant in relation to those of his/her peers.

RATING SCALE

- 1 = SUPERIOR.....Outstanding potential based on demonstrated performance**
- 2 = ABOVE AVERAGE.....Demonstrates capabilities ahead of peers**
- 3 = AVERAGE.....Demonstrates capabilities typical of peers**
- 4 = BELOW AVERAGE.....Capabilities on a lower scale than that of peers**
- 5 = NOT OBSERVED.....Insufficient contact to give an opinion**
- 6 = INFERIOR.....No capabilities or growth potential demonstrated**

MARK APPROPRIATE BOX WITH

	1	2	3	4	5	6
1) Academic potential as reflected by performance in class.						
2) Respect demonstrated by peers.						
3) Ability to accept criticism by persons with authority.						
4) Willingness to conform to established rules of conduct.						
5) Ability to communicate orally.						
6) Interest/willingness to accept responsibilities in extracurricular activities.						
7) Ability to make friends easily.						
8) Interest in participating in competitive situations.						
9) Ability to work toward goals when in subordinate position.						
10) Ability to influence others in definite lines of action.						
11) Interest in seeking positions of leadership.						
12) Ability to carry a demanding academic program at the college level.						
13) Ability to deal with frustration.						
14) Personal appearance.						
15) Ability to communicate in writing.						

Reference's Name: _____

(Signature of Reference) (Date)

Address: _____

Reference Questionnaire

(Page 2 of 2)

In your own words, please state the applicant's most outstanding qualities, how long you have known applicant, and in what capacity you have known the applicant.

To be completed by Applicant:

Name: _____

Address: _____

To be completed by Reference:

(Signature of Reference)

Address : _____

High School: _____

**COLUMBIA COUNTY MERCHANTS ASSOCIATION
SCHOLARSHIP FUND PROGRAM**

**APPLICANT RATING FORM
(Program Use Only)**

Applicant: _____
(Social Security Number-Last 4 Digits)

School: _____

Academic Achievement (20 points maximum) Class ranking: _____

- Top 3% 10 points
- Top 7% 8-9 points
- Top 10% 6-7 points
- Top 15% 4-5 points
- Top 25% 2-3 points
- Below Top 25% 0 points

Scholastic Aptitude Test (Critical Reading and Math)
(20 points maximum) _____

- 1400-1600 9-10 points
- 1300-1399 7-8 points
- 1200-1299 5-6 points
- 1100-1199 3-4 points
- Below 1100 0 points

Extracurricular Involvement/citizenship (20 points maximum) _____

Essay (20 points maximum) _____

References (20 points maximum) _____

Total: _____

Comments: _____
