

The Friends of the Tobacco Festival Scholarship Application

Dead Line April 20, 2022

Name: _____

Address: _____

Birthdate: _____ Telephone: _____

Current GPA: _____ Graduation Date: _____

College/Trade School Attending: _____

ACT/SAT Score: _____

Have you already been accepted: YES___ NO___ If yes, please enclose copy of letter of acceptance

*****Please enclose a 1-page essay on:**

The Importance of Community Service***

Reason for applying for this Scholarship: _____

Will you be receiving Financial Assistance from other sources? If so, please list. _____

Please list your extracurricular activities (scholastic and community): _____

Mother/Guardian name, Occupation & Place of Employment:

Father/Guardian name, Occupation & Place of Employment:

Number of people living in the household: _____

Name and address of 3 references and 1 letter of recommendation attached. Please do not include relatives. (I.e. faculty at school, someone in your community)

1: _____

2: _____

3: _____

As an applicant, I fully realize that this scholarship is to be applied toward education or education expenses. Should the recipient drop out of school before one semester has been completed, the scholarship is forfeited and must be reimbursed in full to The Friends of the Tobacco Festival.

I, _____, hereby agree to the above. Parental signature required if applicant is under 21 years of age.

Return to P.O. Box 404

Pennington Gap, VA 24277

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