

REJUVENATION, INC.

SCHOLARSHIP APPLICATION

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED

THREE -- \$1000 scholarships will be awarded to Lee County High School Senior graduates. The scholarship money will be paid directly to the school designated by the recipient in writing. This **COMPLETED** application must be returned to the High School Counselor by _____.

Name: _____ Date: _____

Address: _____ Phone: _____

_____ Birth date: _____

Father's Name _____

Occupation: _____

Mother's Name _____

Occupation: _____

Name of College you plan to attend: First Choice: _____

Second Choice: _____

GPA through First Semester of Senior Year: _____

REQUIREMENTS:

1. **ATTACH A LETTER IN YOUR OWN HANDWRITING** and (100 words or less) Telling why you would like to receive this scholarship.
2. **INCLUDE TWO (2) LETTERS OF RECOMMENDATION** or character reference. These may come from a minister, teacher, employer or an adult family friend.
3. **10 HOURS OF COMMUNITY SERVICE** at Rejuvenation Thrift Store will be required to be completed before this scholarship is awarded. These hours of service must be completed before AUGUST 1, 2021 or the scholarship WILL BE FORFEITED! The store is located at 179 South Main in Giddings. If you are selected to receive this scholarship you will be informed as to whom to contact to make arrangements to schedule your hours at the store. In the event that the scholarship is not awarded because of failure to comply with this requirement, Rejuvenation Inc. may decide to award the scholarship to another applicant. **By signing below you acknowledge that if you DO NOT have 10 hours of community service completed by August 1, 2021, after you have been awarded this scholarship, IT WILL BE FORFEITED.**

Student's signature: _____

Parent's signature: _____

Counselor's signature: _____

Total number of family members living at home: _____

Number of dependants in your parent's family: Children: _____ Ages: _____

Number attending college? _____

What portion of financial expenses are your parents responsible for? _____

Are there any other financial considerations, such as outstanding medical bills or monthly expenses, which need to be noted? _____

Have you been awarded any other scholarships? _____

If yes, what kind and what expenses will it cover? _____

If you do not receive any scholarships, how do you plan to pay for your future education? _____

EXTRACURRICULAR ACTIVITIES: _____

HONORS AND AWARDS: _____

COMMUNITY OR OTHER ACTIVITIES: _____

WORK ACTIVITIES: Please indicate any employment or work related activities that you are responsible for, including those performed at home or related to a family business: _____
