

Buncombe County Schools Foundation Scholarship Application Form

Deadline – School Counseling Office Friday, March 4, 2022

Name: _____

High School: _____

Eligibility

To be eligible for a BCSF scholarship, students must be currently enrolled in a Buncombe County High School, and a graduating senior. Student must be planning to attend an appropriate secondary program (technical/community college, junior college, four-year college/university, apprenticeship.)

Guidelines

1. Complete fillable application.
2. Copy of transcript must be included.
3. Provide two letters of reference (See Selection Criteria about each scholarship for additional information about reference letters. In most cases, only two recommendation letters are needed.) **DO NOT PUT IN SEALED ENVELOPES.**
4. To be considered for any scholarship, students must provide a copy of the first page of Student Aid Report (SAR) form that includes the EFC Number (Expected Family Contribution).
5. **Print on front only. Please do not print on back.**
6. Please **do not** staple. Paperclip the pages together
7. Completed applications must be printed and submitted to your school Counselor by March 4, 2022.

Checklist

(Please submit information in this order) – Incomplete application packet will not be considered.

- ☐ Student Scholarship Application (This Application can be used for the BCSF Sponsored Scholarships)
- ☐ Scholarships chosen by your High School Scholarship Committee, unless otherwise noted) (Please attach additional sheets, if needed)
- ☐ Scholarship Selection Checklist- sheet that allows you to select the scholarships you are applying for.
- ☐ Financial Aid Information (in Scholarship Application)
- ☐ Copy of the **FIRST PAGE ONLY** of the SAR form that includes EFC (Expected Family Contribution)
- ☐ Resume
- ☐ Transcript
- ☐ Copy of ACT and/or SAT Score Report (Counselor to complete on first page of Application)
- ☐ Two Letters of Reference (Please read the section entitled **Selection Criteria** about each scholarship for additional information about reference letters. In most cases, only two recommendation letters are needed.) Please do not put in sealed envelopes.
- ☐ An essay of 500 words or less that describes your career goals, future plans, etc. If you are applying for a scholarship that specifies a career (i.e. education or nursing), explain why education or nursing is your career goal and discuss any event that has influenced your choice. Also, you may want to talk about a specific person who has been instrumental in your decision. Please print your essay on the front only.
Essay required for ALL scholarships. See scholarship description for essay topic. If essay not noted on scholarship description, use topic stated in this paragraph.

Scholarship Award

Scholarship checks will be written and mailed to the college/university in late June/early July.

In some cases if you receive full funding from other sources, this may eliminate you from being awarded certain BCSF scholarships. The Buncombe County Schools Foundation reserves the right to revoke the scholarship if the guidelines are not met or majority of costs are covered through other means. Scholarship Agreements will be collected from all recipients before payments are finalized. If you are awarded a Paddison Family Scholarship, you will be required to provide BCSF a copy of your Financial Award Letter/ form from the college/university you are attending before payment is made to your institution of higher learning.

**Buncombe County Schools Foundation
Student Scholarship Application**

Deadline: March 4, 2022

Before completing, please review the scholarship booklet with the scholarship descriptions. Please print the checklist which has the scholarship you can apply for and check the ones that are applicable to you and your school. Please provide that list to your counselor so that it can accompany this application. Counselors will send your application to the BCS Foundation Office by Wednesday, March 15, 2022. Thank you and good luck!

Student Information (Please complete via computer or use Black or Blue Ink if completing by hand)

Name: _____
(Last) (First) (Middle)

Permanent Address: _____
Street Address City State Zip Code

Home Phone Number: _____ Cell Number: _____

High School: _____ Student Email: _____

Please list the college(s) you have applied to for acceptance:

College	Accepted (Y/N)	Pending Notification (Y/N)

Name of College you plan to attend: _____

Major Area of Study: _____ Minor Area of Study: _____

Career Goal: _____

List any additional scholarships and/or loan assistance (federal/state/private) you have applied/received and amounts: (Please attach sheet if additional lines are needed)

Name of Scholarship/Type of Loan Assistance	Received (Y/N)	Pending Notification	Amount of Scholarship/Loan Assistance
			\$

Counselor's Verification

School Name: _____			
Counselor's Name _____		Counselor's Initials _____	
Class Rank: _____	GPA: _____	Highest SAT: _____	ACT: _____

Financial Aid Information

Some scholarships are based on need; therefore, we ask that you provide the FIRST PAGE ONLY of your SAR report including the EFC (Expected Family Contribution). If you are applying for the Paddison Scholarship this is a requirement. Thank you, as this will help the scholarship committee evaluate your financial situation.

Family Information (To be completed by parent/guardian of the scholarship applicant)

Parent /Guardian Name: _____

Home Address: _____

Daytime Phone: _____ Email: _____

Occupation: _____ Employer: _____

Second Parent/Guardian Name: _____

Home Address: _____

Daytime Phone: _____ Email: _____

Occupation: _____ Employer: _____

Self Supporting Occupation: _____ Employer: _____
(Independent of parent or guardian)

How much does your family expect to contribute to cover college costs?

(Expected Family Contribution - EFC): _____ **(This is found on SAR)**

In what range was your parent(s)/guardian's income for the previous calendar year enter it HERE:

- | | |
|--|--|
| <input type="checkbox"/> Below \$15,000 | <input type="checkbox"/> \$60,000 - \$80,000 |
| <input type="checkbox"/> \$15,000 - \$25,000 | <input type="checkbox"/> \$80,000 - \$100,000 |
| <input type="checkbox"/> \$25,000 - \$40,000 | <input type="checkbox"/> \$100,000 - \$120,000 |
| <input type="checkbox"/> \$40,000 - \$60,000 | <input type="checkbox"/> \$120,000 or Above |

Number of dependents claimed on current taxes (including applicant): _____

Please list information for additional sibling (s) supported by parents/guardian who also supports the scholarship applicant:

Name	Age	School Attending

Please select one of the following if applicable and circle once printed:

Single Parent	Married – filing taxes jointly
Head of Household	Qualifying widow(er) w/dependent child
Married – filing taxes separately	

By signing below, you are agreeing that all information provided above is accurate and correct.

Parent/Guardian Signature

Date

Student Name: _____

NOTE: APPLICANT MAY CHOOSE TO SUBMIT AN ATTACHED SHEET OF THE FOLLOWING INFORMATION IN LIEU OF USING THIS FORM.

SCHOOL ACTIVITIES

Please list extracurricular activities in which you have participated during the past four years. (Include clubs, school sports, student government, fine arts, other honors/awards, etc.)

ACTIVITY	# MONTHS/YEARS	LEADERSHIP POSITION, LETTERS EARNED, AWARDS, RECOGNITION, ETC.

COMMUNITY & PERSONAL ACTIVITIES

Please list community, religious and personal activities in which you have participated during the past four years. (Include volunteer work, youth programs, athletic programs, music, dance, scouts, 4-H, and hobbies to which you have devoted time).

ACTIVITY	# MONTHS/YEARS	# Volunteer Hours	LEADERSHIP POSITION, LETTERS EARNED, AWARDS, RECOGNITION, ETC.

WORK EXPERIENCE

Please list any work experience (including self-employment) you have made during the past four years. (Include employment during the school year and summer months.) Complete this information beginning with your most recent work experience.

Employer	Position	Dates of Employment	Hrs/Wk

Student Name: _____

By signing this application, you are stating that the information you submitted is accurate and correct to the best of you and your parent/guardian knowledge.

Student: _____ Date: _____

Parent/Guardian: _____ Date: _____

REMINDER:

Please provide the FIRST PAGE ONLY of your SAR report including the EFC (Expected Family Contribution).

If you are applying for the Paddison Family Scholarship, the first page of your SAR is required.

Please attach the checklist that corresponds to your school with this application.

Please mark through all Social Security numbers. Once we finish the selection process, all important documents will be shredded.