

# COY WILLIAMS MEMORIAL SCHOLARSHIP

One \$500 scholarship will be awarded this year. Applicants must have graduated from Seminole County High School and have enrolled or intends to enroll in a post secondary educational institution which includes but is not limited to colleges, universities, technical schools. They also must have a minimum high school GPA of 3.40 and completed or be enrolled in at least one Advanced Placement Course.

**This scholarship will be awarded on the basis of Academic Achievement, Extracurricular School Activities, Community Service, and Leadership Qualities. A transcript must be attached in order to be considered.**

Please complete all items on this application form as well as providing two letters of recommendation. Application must be submitted by March 1st to the Senior Guidance Counselor.

## I. Getting To Know You

1. Full Name \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

2. Home Address \_\_\_\_\_  
Street/PO Box \_\_\_\_\_ Town/City \_\_\_\_\_ State/Zip Code \_\_\_\_\_

Phone Number: \_\_\_\_\_

3. Name of Parents or Guardian \_\_\_\_\_

Address of Parents or Guardian \_\_\_\_\_

## II. Academics

4. High School Cumulative GPA: copy of grades to be attached \_\_\_\_\_

5. Indicate latest SAT/ACT scores: \_\_\_\_\_  
CRIT READING WRITING MATH TOTAL

6. College or University to be attended (copy of Letter of Acceptance should be attached.) \_\_\_\_\_

7. Field in which you plan to major? \_\_\_\_\_

## III. Community Service Activities

8. What kind of community service projects have you performed in the last two years (ex. Chairperson of food drive, tutoring, Habitat for Humanity, etc.) \_\_\_\_\_  
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**IV. My Achievements in High School/College and other activities**

9. Offices held: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Honors won in school: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Summarize other interests and activities indicating major offices, responsibilities, honors, recognition, etc.

(a) School: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(b) Community: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. Additional information you want the Scholarship Committee to know (e.g. unusual circumstances, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>Check List:</b>		
_____ SAT/ACT Score	_____ College Accepted	_____ 2 Letters of Recommendation
_____ College Major	_____ High School Transcript	

Date: \_\_\_\_\_, 20\_\_\_\_\_  
(Signature of Applicant)