

# Whitfield Leadership Scholarship

DeMolay Foundation of Georgia, Inc.  
1690 Peachtree St., NW – Atlanta, GA 30309

# APPLICATION

Answers provided will be used only in connection with the application for the Whitfield Leadership Scholarship. **Please note that the selection of the recipient may be influenced by the completeness, neatness and legibility of responses provided via this form.**

Please Print or Type

## A. Contact Information

Applicant's Last Name : \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Legal Residence Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address: (if different from above) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone (Home): (\_\_\_\_\_) \_\_\_\_\_; (Other) (\_\_\_\_\_) (\_\_\_\_\_) \_\_\_\_\_

E-Mail: (Primary) \_\_\_\_\_; (Alternate:) \_\_\_\_\_

## B. General Background:

Date of Birth (mm/dd/yyyy): \_\_\_\_\_; Place of Birth: \_\_\_\_\_  
City/State

Military Service Status: (if applicable) \_\_\_\_\_

Church Affiliation & Location: \_\_\_\_\_

Marital Status: (check one) \_\_\_ Single \_\_\_ Engaged \_\_\_ Married \_\_\_ Divorced \_\_\_ Widowed

### Family Information:

Provide information on applicant's siblings:

Name	Age	Male/Female	Name	Age	Male/Female
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

### High School(s) Attended

School Name	City/State	Grade(s) Completed	Yr(s) Attended
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Anticipated High School Graduation Date: (month/year) \_\_\_\_\_

\*\*\*\*\* **Applicant must submit OFFICIAL COPY of transcript of high school grades through the end of the senior year in high school for review by scholarship award committee.** \*\*\*\*\*

Has your application for admission been accepted by any colleges? \_\_\_\_ Yes \_\_\_\_ NO If yes, name the institution(s) that have notified you of your acceptance.

College Name	Location	Program of Study
_____	_____	_____
_____	_____	_____
_____	_____	_____

College you plan to attend: \_\_\_\_\_ Start Date: \_\_\_\_\_  
Name and Location month/year

**Career Plans**

Provide information on the type of degree you plan to pursue and how you intend to put that degree to work in the future.

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

What prompted you to pursue this particular career field?

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

**References**

Please include with your application a letter of recommendation from three individuals who have known you for a minimum of three years. Please provide contact information for each of the references who will be providing a letter for you. Each letter should focus on a specific aspect of your life and character. These include:

- 1) Reference Area: Scholastic focus and ability

Name of reference provider: \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Telephone:\_(\_\_\_\_\_)\_\_\_\_\_ (day) // \_(\_\_\_\_\_)\_\_\_\_\_ (evening)  
E-Mail Address: (Primary) \_\_\_\_\_ // Alternate) \_\_\_\_\_

- 2) Reference Area: General character and reputation

Name of reference provider: \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Telephone:\_(\_\_\_\_\_)\_\_\_\_\_ (day) // \_(\_\_\_\_\_)\_\_\_\_\_ (evening)  
E-Mail Address: (Primary) \_\_\_\_\_ // (Alternate) \_\_\_\_\_

- 3) Reference Area: DeMolay service and involvement

Name of reference provider: \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Telephone:\_(\_\_\_\_\_)\_\_\_\_\_ (day) // \_(\_\_\_\_\_)\_\_\_\_\_ (evening)  
E-Mail Address: (Primary) \_\_\_\_\_ // (Alternate) \_\_\_\_\_



**DeMolay Related Activities/Experience:**

Provide information on your involvement in DeMolay during your high school career and recap any leadership positions or roles you have held in any of these activities

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**Work Experience:**

Provide information on any jobs you have held during your high school years, whether part-time, or full time (such as during the summer break.)

<b>Company</b>	<b>Year(s)</b>	<b>Type of Work</b>

**E. General Information**

What two books or articles have you read within the past year that you consider to be significant and why?

(1) \_\_\_\_\_

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(2) \_\_\_\_\_

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**Career Goals**

Have you settled on a career goal? If yes, what is your goal and why did you select this?

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**Family Background**

Applicants for this scholarship are representative of the diverse economic and occupational backgrounds of families in the United States. Describe any personal characteristics about yourself, or your family, that you wish to share. This information will be treated confidentially.

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**F. Financial Information**

Are you currently employed?  yes  no If yes, is it  part time or  full time?

Current Employer? \_\_\_\_\_ Job Title \_\_\_\_\_  
Company Name City/State

Are you planning to work during the next school year?  yes  no //  Part time  Full Time

Where will you live during the next school year? (check one)

- Parents' Home  On-Campus Apartment  
 Your Home  Dormitory  
 Off-Campus Apartment  Other (Explain) \_\_\_\_\_

**List any children of yours, or other children for whom you are a contributor to their financial needs.**

Name	Age	Male/Female	Name	Age	Male/Female
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**Household Income Information:**

Provide information on the two primary income earners in the household in which you lived while in high school.

Name \_\_\_\_\_

Relationship: (check one)

Father  Mother

Step-father  Step Mother

Legal Guardian  Other \_\_\_\_\_

Annual Income: \_\_\_\_\_

Names and ages of all individuals for whom this income provides financial support.

Name	Age	Name	Age
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name \_\_\_\_\_

Relationship: (check one)

Father  Mother

Step-father  Step Mother

Legal Guardian  Other \_\_\_\_\_

Annual Income: \_\_\_\_\_

Names and ages of all individuals for whom this income provides financial support.

Name	Age	Name	Age
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Provide information on any extenuating circumstances present that have a significant impact on the finances of the household (such as chronic illness, handicap, etc.)

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**Household Employment**

Provide information on those who are providing income to support the operation of the household.

Full Name	Employer	City/State	FullTime?	Job Title
Father or Male Guardian				
Mother or Female Guardian				
Spouse/Other				

**Income Sources**

List the approximate amount and source of income you anticipate receiving during the first year of your college enrollment. Be sure to include all jobs, grants, scholarships, loans and assistance from parents or others. Attach additional page if needed.

Amount	Source	Amount	Source

**Expenses**

List your anticipated financial needs for the first year of your college enrollment. This should include, but is not limited to, housing, meals, books and fees, insurance, any child support obligations and other personal expenses.

Amount	For	Amount	For

**Please review this form in its entirety and ensure that all questions have been answered completely. AN OFFICIAL COPY OF THE APPLICANT'S HIGH SCHOOL TRANSCRIPT MUST BE PROVIDED AS PART OF THE APPLICATION PACKET.**

**Certification**

By my signature below, I hereby affirm and certify that the personal and financial information provided in this application is truthful and accurate to the best of my knowledge. I further affirm that I seek assistance via this scholarship with the intent of furthering my educational aims and for no other purpose.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_