

# **The Glynn Academy Class of 1969 Memorial Scholarship**

---

The Glynn Academy Class of 1969, a member of Communities of Coastal Georgia Foundation, will award a \$2,500 academic scholarship to a graduating Glynn Academy senior who has been accepted to attend a Georgia academic college or university. There will be no restriction regarding race, ethnicity, creed or gender.

The senior must meet the following criteria:

1. Applicants must have a cumulative grade point average **between** 2.70 and 2.99 HOPE grade point average.
2. Applicants must supply family background and demonstrate financial need.
3. Applicants must be a good school citizen with no demerits, excellent attendance and no failures.
4. Applicants must demonstrate active involvement in extracurricular school and community activities.

## **Student Responsibilities**

- A. Complete scholarship application no later than **4/20/20**.
- B. Attach an official copy of high school transcript including SAT/ACT test scores.
- C. Attach two letters of recommendation.
  - a. 1 – from an academic instructor
  - b. 1 – from a community member who monitored community service
- D. Attach a photograph.
- E. Incomplete applications will not be considered.

The scholarship to be awarded may be used for tuition, fees, room and board. Payment will be made to the college on behalf of the recipient in halves prior to the start of each semester. Recipient must achieve at least a 3.0 average to receive the 2<sup>nd</sup> half of the scholarships prior to the 2<sup>nd</sup> semester. The student must submit a copy of their 1<sup>st</sup> semester grades to The Communities of Coastal Georgia Foundation – [epost@coastalgeorgiafoundation.org](mailto:epost@coastalgeorgiafoundation.org), before they can receive the 2<sup>nd</sup> half of their award. If the student withdraws or otherwise fails to complete either semester, the money must be returned to the Foundation by the educational institution.

Selection of the recipient shall be determined by the Class of 1969 Scholarship Committee and the Communities of Coastal Georgia Foundation, applying the above criteria.

# The Glynn Academy Class of 1969 Memorial Scholarship

---

Provided by The Communities of Coastal Georgia Foundation / Glynn Academy Class of 1969 in memory of their "Gone But Not Forgotten" for the benefit of Glynn Academy students.

## Scholarship Application

Please type or print clearly in black ink. Attach additional sheets if necessary. Please supply all information requested. Only complete applications will be considered.

### Student Information

Full Name \_\_\_\_\_

Phone \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Parent or Guardian's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

List the colleges you have applied to and been accepted

College/University you plan to attend: \_\_\_\_\_

College curriculum planned: \_\_\_\_\_

### Family Background

Number of children in family, by age \_\_\_\_\_

Parent's marital status \_\_\_\_\_

Educational background of parents and other children in your family:

Occupation of Father/Guardian \_\_\_\_\_ Employer \_\_\_\_\_

Gross Income last year \$ \_\_\_\_\_

Occupation of Mother/Guardian \_\_\_\_\_ Employer \_\_\_\_\_

Gross Income last year \$ \_\_\_\_\_

# **The Glynn Academy Class of 1969 Memorial Scholarship**

---

## **Financial Background**

Are you or your parents/guardians receiving any outside assistance? \_\_\_ **Yes** \_\_\_ **No**

If yes, please explain:

Approximate amount saved for college \$ \_\_\_\_\_ From what sources do you expect to receive financial help

Additional information regarding your financial need

## **Honors and Awards**

List specific information of any school honors:

What awards have you received (in school or through community involvement):

Extracurricular activities (including Band, ROTC and athletics); list any offices held:

# **The Glynn Academy Class of 1969 Memorial Scholarship**

---

List other non-school activities you have done and civic organizations you have been involved with; please provide specific explanations of your involvements.

## **Work Experience**

List jobs held outside school hours and hours worked

My signature below certifies that all information and statements are true and accurate and the essay is my own words.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

The deadline for submission is **April 20, 2020**

Please send the application and any other related materials in PDF format via email to:

[epost@costalgeorgiafoundation.org](mailto:epost@costalgeorgiafoundation.org)

or in hard copy by mail to:

**Communities of Coastal Georgia Foundation**

**ATTN: GA Class of 1969 Scholarship**

**1626 Frederica Road, Suite 201**

**Saint Simons Island, Georgia 31522.**