



Scholarship Application

PURPOSE:

To provide supplemental financial assistance (up to \$500 per semester*) to those single parents who are pursuing a course of instruction which will improve their income-earning potential. Scholarships may be used for tuition, books, utility bills, car maintenance, child care, etc.

*Applicants may reapply for scholarship assistance each semester of study, but preference will be given to those completing their academic careers.

CRITERIA:

Single parents selected for financial assistance will meet the following criteria:

1. Single head of household (single, legally separated, divorced, widowed) with primary custody of a child(ren) under the age of eighteen.
2. Resident of Perry County, Arkansas.
3. Low income person at or near the poverty level.
4. A high school graduate or GED equivalent.
5. Pursuing an undergraduate course of study (full or part-time) to ensure a better standard of living for his/her family. Applicants cannot already have earned a baccalaureate degree, with the exception of candidates for the MA in Teaching.
6. Accepted into a qualifying program.
7. Recipient or applicant of a Pell Grant.

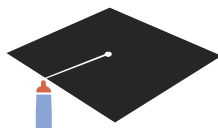
REQUIREMENTS:

The following documents need to be submitted in addition to the attached Application Form (p.1-2):

1. Release of Information Form (p.3)
2. Applicant's statement of goals explaining why you have chosen this particular course of study and what you hope to achieve. Feel free to include any personal information which might be helpful to the Selection Committee (for new applicants only).
3. Three (3) letters of recommendation from people who are familiar with your character and goals and are not your relatives (for new applicants only).
4. Verification of enrollment/acceptance.
5. Verification of Pell Grant status.

DEADLINES:

Fall Semester: September 15
Spring Semester: January 15
Summer Semester: June 15



SINGLE PARENT SCHOLARSHIP FUND

of Perry County

Release of Information

I hereby give permission for all financial and academic information related to my application for a Single Parent Scholarship including financial aid, number of hours of enrollment, and grades to be released, upon request, to the Single Parent Scholarship Fund of Perry County. I also agree to participate in follow up research conducted by SPSFPC after I am no longer receiving scholarship awards and hereby give permission to SPSFPC to obtain enrollment and graduation information from my school as is needed for their subsequent reports.

Signature of Applicant

Date