

Phillips County Single Parent Scholarship Fund
Application Deadlines
Fall.....August 1
Spring.....January 1

Purpose:

To provide supplemental financial assistance (up to \$500 per semester) to 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.

Criteria:

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

1. Resident of Phillips County
2. Single Head of Household with custody of a minor child
3. A high school graduate or have obtained a GED
4. Pursuing an undergraduate course of study
5. Recipient of a Pell Grant
6. Must have and maintain a 2.50 GPA
7. Must be a full time student (12 hours)

Instructions:

Each applicant must submit the following information. Your application packet must be postmarked by the deadline to be considered by the committee.

1. Completed application
2. Provide verification of enrollment/acceptance from your college
3. Three (3) letters or recommendation from people who are familiar with your character and goals.
4. Applicant's statement of goals. Attach a personal statement explaining why you have chosen this course of study and what you hope to achieve.

If you are a returning applicant, you will only need to provide proof of enrollment, GPA status, and a completed application.

Application Packets are to be postmarked and mailed by the deadline to:

Phillips County Single Parent Scholarship Fund
PO Box 785
Helena, AR 72342

B. EDUCATIONAL INFORMATION:

1. Do you have a high school diploma or GED? ___ Yes ___ No
2. Are you currently attending college or school? ___ Yes ___ No
If yes, number of credit hours already completed toward degree/diploma: _____
3. What college or school do you now attend or plan to attend? _____
4. What course of study (major) do you plan to pursue? _____
5. When do you expect to graduate? _____
6. How many credit hours do you now take or plan to take? _____

C. FINANCIAL INFORMATION

1. Will you be working for income while you go to school? YES _____ NO _____
2. Have you applied for a Pell Grant? YES _____ NO _____
Have you been granted a Pell Grant? YES _____ NO _____
Do you know the amount of the Grant? YES _____ NO _____
If yes, give amount (Per semester) _____
If No, you may apply on-line at [HTTP//www.fafsa.ed.gov](http://www.fafsa.ed.gov)

D. ADDITIONAL REQUIREMENTS

1. Please have three people (not related to you) write letters of reference to the Scholarship Committee. They should be familiar with your life experience and with your character.
1. Please attach a personal statement explaining why you chose this particular course of study and what you hope to achieve. Feel free to include any information about you, which may be helpful to the Selection Committee in its evaluation.
2. Please attach a copy of your high school diploma or college transcript (or GED Certificate and test scores) to this application.

YOU MUST SIGN AND DATE THE RELEASE STATEMENT BELOW:

I hereby give permission for all information related to my financial aid to be released, upon request, to the PCSPSF. I give the PCSPSF permission to use my picture for publicity purposes. I understand that this information will be used to acquire donations and other funding for the continuation of this scholarship.

Signature of Applicant

Date

**Phillips County Single Parent Scholarship Fund
Applicant Questionnaire**

The purpose of this questionnaire is to provide information about the applicants to the Office of the AR Single Parent Scholarship. This information will be used for the measure of accurate statistical information that will provide an evaluation report to the parent organization.

Your answers will not in any way help or hinder your opportunity to receive the scholarship from the Phillips County affiliate of SPSF.

Full Name _____

Social Security Number _____

E-mail address _____

Age _____

Gender _____

Race _____

How many children do you have? _____

What are their age(s)? _____

Your intended profession category:

Health Business Computers Law Architecture Education

Engineering Agriculture Psych/Counseling Science

Industrial /Technical Foreign Language

Please list contact information of a close relative or friend who will know how to reach you.

Name	Address	Phone Number
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