

**POINSETT COUNTY SINGLE PARENT SCHOLARSHIP
APPLICATION FORM**

**Please check the Semester for
Which semester you are applying:**

Fall_____	Deadline September 1st
Spring_____	Deadline January 15th
Summer_____	Deadline June 1st

Purpose: To provide supplemental financial assistance to those single parents, who are pursuing a course of instruction, which will improve their income earning potential.

CRITERIA: Single parents selected for financial assistance must meet the following criteria:

1. Resident of Poinsett County, Arkansas
2. High School graduate or equivalent (May apply if enrolled in High School or in the process of obtaining GED)
3. Single head of household (single, legally separated, divorced or widowed)
4. Pursuing an undergraduate course of study to ensure a better standard of living for his/her family
5. Low income person at or near the poverty level
6. Recipient of a Pell Grant or in the process of obtaining same

APPLICANTS: Each applicant must submit the following by the application deadline:

1. Attach the application filled out clearly in ink or typed and submitted directly to:
PCSPSF P.O. Box 280 Marked Tree, AR 72365.
2. Letter of verification of enrollment or acceptance
3. Transcript of high school, technical institute or college (whichever is most recent).
Student copies of transcripts are acceptable
4. Three (3) letters of recommendation from past or present employers, schools, ministers,
or community leaders.
5. A brief paragraph describing educational goals and reasons for choosing field.
6. An interview is required.

PLEASE CHECK APPROPRIATE CHOICE:

Each semester we would like to send names and descriptions of scholarship recipients to those individuals who donate money to the Poinsett County Single Parent Scholarship Fund.

1. If you are selected a recipient, can we use your name along with a description of you using information from your goals? Yes_____ No_____
2. If "no", can we use a description of you WITHOUT YOUR NAME if you are selected as a recipient? Yes_____ No_____

Answering "no" to either of the above will in no way affect your chances of being awarded a scholarship

SECTION I

Name_____ SS#_____

Mailing Address_____

City_____ State_____ ZIP_____

Home Phone: _____ Business Phone: _____

If you do not have a home or work phone, where can you be reached to receive a message? _____

Age _____ Date of Birth _____ How long have you been a resident of Poinsett County? _____

Are you _____ Single; _____ Divorced; _____ Legally Separated; _____ Widowed

Including you, how many individuals are dependent on you for financial help or support? _____

Please list the ages of your children: _____

Is anyone else sharing the household expenses with you? _____ Do you have any relatives living in the area? _____ If yes, what assistance do they provide? _____ housing; _____ child care;

_____ transportation; _____ financial; _____ other. Please explain: _____.

SECTION II - FINANCIAL INFORMATION

Are you covered by any health or medical insurance? _____

Will you be working while you attend school? _____ If yes, how many hours each week? _____

What was your total income for the past 12 months? _____

What will be your total anticipated income once you enter school? _____

SECTION III - INCOME

Please list sources of income in \$ figures in Column A if you receive income from that source in the last 12 months. In Column B, list the \$ amount of income you will receive once you begin the school term.

Source of Income	Column A		Column B	
	\$/month	\$/year	\$/month	\$/year
Friends				
Family				
Employment				
Work Study				
Reserve Armed Forces				
Unemployment Benefits				
Social Security / SSI				
Rehabilitation				
HUD Rental Assistance				
AFDC				
Child Care				
Child Support				
Food Stamps				
Loans				
VA				
State Scholarship				
Grants				
Pell Grant				
Other (please list)				

If you have not been employed outside the home, list your major home and community activities for the past five years. _____

NOTE: Please include anything else about your financial situation you feel would be helpful in evaluating your application: _____
