

The John and L. A. Spears Foundation, Inc.

Scholarship Applicant Checklist

Please submit a completed application packet to the scholarship committee, making sure each item in the list below is included. *Incomplete packets will NOT be considered.*

Part 1

- _____ Personal Information
- _____ Brief statement of why you believe you should receive the scholarship and any background or additional information you wish us to consider.

Part 2

- _____ School and Extracurricular Activities

Part 3

- _____ Test Data
- _____ Personal Appraisal (in sealed envelope with signature of school official completing appraisal written across seal)
- _____ Official School Transcript

Application Number 20_____ (Office use Only)

The John and L. A. Spears Foundation, Inc.
Scholarship Committee
Scholarship Application

TO: Scholarship Applicant

FROM: Scholarship Committee

The scholarship application is divided into three parts. Part 1 concerns personal information. Part 2 asks you to list your extracurricular activities and college plans. Part 3 concerns your scholastic achievement, requiring test scores, an official transcript, and personal appraisal. The instructions to Part 3 contain information concerning the completion and disposition of Part 3.

Please complete these three parts and return them to:

The John and L.A. Spears Foundation, Inc.
706 Holcomb Bridge Road Bldg. 1
Norcross, GA 30071

To ensure an unbiased review, we ask that no information which could identify you by name appear on Parts 2 and 3 (other than your name on part 3, page 1, which will be deleted before the review). You will be assigned an application number for tracking purposes.

Following the return of all parts of the application, the board members will review the applications and select recipients to receive the scholarship. All applicants will be notified of the board's decision, including amount of scholarship awarded if approved.

The deadline for receipt of all parts of the application is June 15 for the fall semester and November 15 for the spring semester.

If you have any questions concerning the application or the scholarship, please call the Foundation at 770-368-8081. Thank you and good luck.

The John and L.A. Spears Foundation, Inc.

Application Number 20_____ (Office use Only)

The John and L. A. Spears Foundation, Inc.
Scholarship Committee
Scholarship Application

Please use black ink or typewriter to complete *this* packet and return it no later than June 15 for the fall semester and November 15 for the spring semester, to:

The John and L.A. Spears Foundation, Inc.
706 Holcomb Bridge Road Bldg. 1
Norcross, GA 30071

The John and L. A. Spears Foundation, Inc.
Scholarship Committee
Scholarship Application

Part 1

Personal Information

Name _____
(First) (Middle) (Last)

Address _____
Best Contact Address Street or PO Box City State Zip Code

If currently in college circle your classification. Freshman Sophomore Junior Senior

If you are not attending college list your anticipated start date. _____.

College Major _____ Anticipated College Graduation Date _____

Date of Birth _____ Place of Birth _____ Sex _____

Phone Number _____ Social Security Number _____

Cell Number _____ Email Address _____

Your Father's Name _____
(First) (Middle) (Last)

Your Mother's Name _____
(First) (Middle) (Last)

Please attach a brief statement of why you believe you should receive the scholarship and any background or additional information you wish us to consider.

I affirm that the information given in this application is correct to the best of my knowledge and belief, and agree that the decision of the Scholarship Committee is final.

(Signature of Applicant)

Date

The John and L. A. Spears Foundation, Inc.
Scholarship Committee
Scholarship Application

Part 2

SCHOOL/EXTRACURRICULAR ACTIVITIES

List below the name, address, and dates of each high school or similar institutions you attended. Use the back of this form or attach additional sheets if necessary.

<u>Name of School</u>	<u>Address</u>	<u>From</u>	<u>To</u>
		<u>Attendance Dates</u>	

List below any extracurricular activities in which you participated. Use the back of this form or attach additional sheets if necessary.

NAME OF ACTIVITY	ACTIVITY CODE*	TIME PERIOD	OFFICE, ELLECTED / APPOINTED

*Enter Codes (listed below) in the appropriate column to indicate the nature of the activity.

- A- Athletic (sports, cheerleading, rifle club)
- C- Civic (service clubs, scouts, "Y" club)
- H- Hobby (photography, stamp, band, drama)
- R - Religious (church youth organization, choir)
- SC- Scholastic (Scholarship club, Gov. Honors Prog., student govt.)
- So- Social (booster/letter club, senior superlatives)
- St- Study (math, language, science, debate team)
- O- Other (please explain): _____

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Scholarship Committee
Scholarship Application

Part 3

APPLICANT'S LETTER

Please complete this letter (make two copies if necessary if both a counselor/advisor and a teacher are involved in its completion) and include it, with the attached pages 2 and/or 3, to one of your high school teachers and/or counselors for completion. If you are in college, page 3 can be completed by an advisor. Part 3, in addition to your test scores and personal assessment form, also requires an official school transcript.

Date: _____

Dear Teacher/Counselor _____,

I am applying for a scholarship and would appreciate your help in supplying required information.

Please complete the attached pages 2 and/or 3. Please place page 3 (personal assessment) in a sealed envelope with your signature written across the seal. I understand that it is my responsibility to retrieve this information from you in order to complete my application packet.

The scholarship committee needs this material no later June 15 for the fall semester and November 15 for the spring semester. Thank you for your assistance in helping me compete for this scholarship.

Sincerely,

Name: _____

I expect to graduate High School in: _____
(Month) (Year)

Colleges or universities I am considering:

The John and L. A. Spears Foundation, Inc.
Scholarship Committee
Scholarship Application

Part 3

(To be completed by High School Official)

TEST DATA

These college entrance examination board test findings will be kept strictly confidential. They will be evaluated carefully by the scholarship committee and will be considered in relation to all other information received:

SAT

V: _____ M: _____ W: _____

ACT (if applicable)

English: _____ Math: _____ Reading: _____ Composite: _____

PSAT (optional)

V: _____ M: _____

Signature _____ Position _____

Print Name _____ Date _____

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Part 3

Applicant: Please have a counselor/teacher who is not related to, but personally knows you, complete the following information, placing the completed assessment in a sealed envelope with his or her signature written across the seal.

PERSONAL APPRAISAL

Please indicate with a check mark in the appropriate column the rating that is most representative of the applicant's characteristics. This information will be kept confidential.

	Poor	Fair	Average	Good	Excellent
Capacity to Learn					
Originality / Creativity					
Ability to Lead					
Initiative					
Emotional Stability					
Sense of Purpose					
Integrity and Character					
Activity participation					

Do you consider this student's planned course of study in college to be compatible with his/her aptitude, desire, temperament and demonstrated ability? _____

How long have you known the applicant? _____

Other relevant comments _____

Signature _____ Position _____

Print Name _____ Date _____

Thank you for your time in helping this student apply for the John and L.A. Spears Foundation Scholarship. Please place this assessment in a sealed envelope with your signature written across the seal. The student is to collect this assessment from you in order to complete their packet.