

EARN + LEARN *with*



SCHOLARSHIP APPLICATION

FULL NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____

EMAIL ADDRESS: _____

PARENT/GUARDIAN NAME (S): _____

COLLEGE/UNIVERSITY

ATTENDING IN FALL: _____

ADDRESS: _____

DEGREE TYPE: ☐ CERTIFICATE ☐ ASSOCIATE ☐ BACHELOR'S

MAJOR: _____

MINOR OR AREA OF CONCENTRATION: _____

PLEASE ATTACH MOST RECENT TRANSCRIPT FROM HIGH SCHOOL OR COLLEGE
WITH GPA ALONG WITH ONE LETTER OF RECOMMENDATION

BY SIGNING THIS APPLICATION, I GIVE PERMISSION TO EFFINGHAM EQUITY
TO PUBLICIZE MY SCHOLARSHIP AWARDED IF CHOSEN AS THE RECIPIENT.

APPLICANT'S SIGNATURE: _____ DATE: _____

THEEQUITY.COM/SCHOLARSHIP

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SCHOLARSHIP APPLICATION

PROVIDE EVIDENCE OF YOUR SCHOOL ACTIVITY PARTICIPATION, COMMUNITY INVOLVEMENT, ACHIEVEMENTS, AND LEADERSHIP SKILLS SUPPORTING YOUR APPLICATION.

SCHOOL ACTIVITIES:

COMMUNITY INVOLVEMENT:

SIGNIFICANT HONORS, AWARDS, AND ACCOMPLISHMENTS RECEIVED:

WHY SHOULD YOU BE CONSIDERED FOR THE EQUITY'S EARN AND LEARN SCHOLARSHIP?