

EUNICE A. TURNER EDUCATION FOUNDATION SCHOLARSHIP APPLICATION

Please **PRINT** in dark ink or type. Read the instructions carefully. You must submit this application along with a copy of your transcript (**2.5 or higher**), three (3) letters of recommendations (cannot be from relatives), financial information (**copy of previous year 1040**), and a 500 or less word essay explaining your future goals along with any information that you feel will help us in our decision. Mail your application and requested articles of information NLT **June 30th** to the **Eunice A. Turner Foundation Selection Committee, PO Box 291048, Columbia, SC 29229.**

Renewal: Prior Applicants submit with application, your transcript, financial information and letter of attendance from school.

PERSONAL INFORMATION

Name _____ SSN _____
(Last) (First) (MI)

Permanent Address _____
(Number and Street) (City) (State) (Zip Code)

Mailing Address _____
(If Different) (Number and Street) (City) (State) (Zip Code)

Home Phone () _____ E-mail Address _____

Date of Birth (mm/dd/yyyy) _____ Marital Status _____ Number of Household Members _____

Parents/Guardians/Spouse Name (if applicable) _____
Address _____
(Number and Street) (City and State) (Zip Code)

Have you ever been convicted of felony? Y/N (if yes explain) _____

EDUCATIONAL INFORMATION

Name of School _____ Grade _____ Grade Point Average _____
Address _____
(Number and Street) (City) (State) (Zip Code)

Phone () _____ Guidance Counselor _____

List your Extra Curricular Activities (e.g. clubs, athletics, community services, etc.), Honors and Awards:

High School Students Provide the Name of College _____
Address _____
(Number and Street) (City) (State) (Zip Code)
Phone () _____ (submit a copy of acceptance letter with application)

FINANCIAL INFORMATION (Submit a copy of previous year 1040)

How much did you (and spouse, if applicable) earn in the previous year? (Wages, salaries, tips, etc)

\$ □□□, □□□.□□

How much did your parents earn from working in the previous year? (if applicable)

\$ □□□, □□□.□□

As of today, what is your / parents total current balance of cash, savings and checking accounts?

\$ □□□, □□□.□□

SIGNATURE _____ Date _____

By signing this application, I agree to provide the requested information to verify the accuracy of the completed application. I understand that purposely giving false or misleading information will disqualify me from receiving this scholarship. I also understand that the Eunice A Turner Foundation reserves the right to publish my name on their website.