 The Rev. DePayne V. Middleton Education

Scholarship Application

Deadline: This application form and all other required documentation must be received by May 1, 2019 (5:00 p.m. eastern time). Mail to: The Rev. DePayne V. Middleton Foundation, 4740 Lewis and Clark Trail, Summerville, SC 29485. Questions? Call (843) 879-9166 (5pm – 8pm weekdays) or e-mail: virtuoushummingbird@gmail.com Website: [www.thedepaynevmiddleton.com](http://www.thedepaynevmiddleton.com)

**Eligibility:** Students must meet these criteria to be eligible. Please initial.

1. **\_\_\_\_**\* I confirm that I will be attending in a 2 or 4 year institution for the Fall 2019 Semester.
2. **\_\_\_\_**\* I live in Charleston, SC.
3. **\_\_\_\_\*** I am a female.
4. **\_\_\_\_**\* If chosen for a scholarship, I will attend an event during the month of June to accept and meet the board. (Event Details coming soon)

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| Please **type** your answers. *Use a additional piece of paper if necessary* |
| 1. | Last Name: | First Name, Middle Initial: |
| 2. | Mailing AddressStreet: City: State: Zip:  |
| 3. | Daytime telephone number: ( )Email address: |
| 4. | Date of birth: Month Day Year  |
| 5. | Cumulative Grade Point Average (GPA): \_\_\_\_\_\_\_\_\_\_ (On a 4.0 scale) Attach your certified transcript  |
| 6. | Name and location of current high school:  |
| 7. | List any other postsecondary institutions you have attended:Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_ Years: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_ Years: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 8. | A. List any academic honors, awards and membership activities while in high school: B. List your hobbies, outside interests, extracurricular activities and school related volunteer activities:C. List your non-school sponsored volunteer activities in the community:  |
| 9. | A. If you have decided on the college you will attend for the Fall Semester of 2019, please list the school name with its’ city and state.-------------------------------------------------------------------- City -------------------------------- State----------------B. If not, list your top three (3) college choices: * \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_
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| 10.  | Anticipated field of study: |
| 11. | What profession or field of employment do you wish to enter with your college degree? Why? |
| 12. | **College admission composite test score(s).** Attach photocopies of all score reports.ACT \_\_\_\_\_\_\_\_\_ SAT \_\_\_\_\_\_\_\_\_ Other |
| 13. | Classification in fall semester 2019: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (freshman, sophomore, junior, senior, graduate, PhD candidate, postgraduate)  |
| 14. | Family gross annual income from your most recent Income Tax form 1040 Line #22:  <$20, 0000 $20,000-$40,000 $40, 000-$60,000 $60,000-$80,000 >$80,000 |
| 15. | Number of years of residency in Charleston County, SC: |
| 16. | Please list any other scholarships applied for and any awarded: |
| 17. | Name & address of parent(s) or legal guardian(s): *(Include address if different than your own listed in Question 2.)* Name(s):Street: City: State: Zip:Home phone of parents or legal guardians: Work phone: |
|  18. | On a separate paper, please write an essay of (500 - 700 words) addressing the following:Describe how you would impact your community to become more diversified and how does that correlate with mass shooting attacks that are hate driven? Discuss any challenges you may deal with and how you will overcome them. How would this will help you succeed in college and beyond? |
|  19. | Two (2) letters of recommendation from a leader within the volunteer organization you serve or have served and one from a teacher that has taught you your junior or senior year should be attached. |
|  20. | STATEMENT OF ACCURACY FOR STUDENTSI hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent, that if chosen as a scholarship winner, my picture may be taken and used to promote the Rev. DePayne V. Middleton Scholarship Program. I hereby understand that if chosen as a scholarship winner, according to the Rev. DePayne V. Middleton Scholarship policy, I will try to be present at any June 2019 awards ceremony and/or reception to receive my scholarship award. I hereby understand that if chosen as a scholarship winner, according to Rev. DePayne V. Middleton Scholarship policy, it is my responsibility to submit to the Rev. DePayne V. Middleton Foundation, no later than July 2019, a certificate of enrollment for the fall semester, which includes the Student ID number and Financial Aid Office address.I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.**Signature of scholarship applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**   |