

# Beatrice Mays Scholarship Fund Application

*Award criteria: Egg Harbor City student-athlete with a minimum of a 3.0 GPA and is a first-generation college student.*

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Home phone # \_\_\_\_\_ Cell# \_\_\_\_\_

DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Name of High School: \_\_\_\_\_

Name of College /University: \_\_\_\_\_

School Address: \_\_\_\_\_

Course of Study: \_\_\_\_\_

HS Grade Point Average: \_\_\_\_\_

In 100 words or less state your background, school interests, your objectives of educational pursuits, and why you deserved this scholarship.

What percentage of funds for college this year will come from:

Parents: \_\_\_\_\_

Student income: \_\_\_\_\_ Loans: \_\_\_\_\_ Grants: \_\_\_\_\_ Other: \_\_\_\_\_

Father's Occupation: \_\_\_\_\_ Mother's Occupation: \_\_\_\_\_

Number of parents' dependents: \_\_\_\_\_ Number of dependents currently in college: \_\_\_\_\_

Are you a dependent? Yes\_\_ No\_\_

List source and amount of income earned by student during past school year:

\_\_\_\_\_

Applicants Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parents Signature: \_\_\_\_\_

Date: \_\_\_\_\_

A copy of your transcript confirming GPA must be emailed along with the application to be eligible. Your application will not be considered without the inclusion of a transcript.

**Application must be emailed by May 15<sup>th</sup>**

Call (609) 992-3543 or e-mail: [bmays96@gmail.com](mailto:bmays96@gmail.com) for additional information.