

## HIGH SCHOOL GRADUATING SENIOR ARTS SCHOLARSHIP APPLICATION INSTRUCTIONS 2024-2025

FOR USE BY GRADUATING SENIORS PLANNING TO REGISTER IN 2024-2025 AS COLLEGE FRESHMEN

### **ELIGIBILITY**

- SCHOLARSHIPS ARE AWARDED ONLY FOR STUDIES IN THE FIELDS OF THE VISUAL OR PERFORMING ARTS.
- APPLICANT MUST BE A RESIDENT OF SARASOTA or MANATEE COUNTY, FLORIDA. Note: Any change in Personal Information must be reported before the Deadline Date.
- RELATIVES OF EXCHANGE'S BOARD MEMBERS ARE NOT ELIGIBLE TO APPLY.
- COMPLETED APPLICATIONS WITH REQUIRED DOCUMENTS MUST BE SENT BY USPS MAIL TO THE EXCHANGE AND, <u>WITH NO EXCEPTIONS, POSTMARKED NO LATER THAN</u>
  <u>JANUARY 31, 2024.</u>

### THE APPLICATION PROCESS

- A. Download and print out the High School Senior Scholarship Application at www. sarasotawex.com
- B. Supply the information requested. For consideration, all questions must be answered, both completely and legibly.
- C. Place the following in a Manila envelope, in the order listed. **Do not use staples and print on only one side of application document.** 
  - 1. Completed Application (Pages 1-2 only; no need to include this page).
  - 2. Personal Essay of 300 words outlining your educational goals, career aspirations and the reasons why you consider yourself deserving of a Woman's Exchange Scholarship.
  - 3. Two (2) signed, one-page letters of recommendations from a faculty member, instructor or mentor in your proposed field.
- 4. Prior year's copy of IRS Form 1040 (Pages 1-2 only) of any parent, stepparent or guardian claiming you as a dependent with Social Security Numbers blackened out. All information is kept confidential. Failure to provide accurate and truthful information will be cause for disqualification.
- D. Address envelope as follows and mail to:

The Exchange Attention: Grants & Scholarships Committee 539 S. Orange Avenue Sarasota, Florida 34236

E. Lastly, arrange to have your High School Transcript, including Grade 10 through the first semester of Grade 12, sent directly from your school's Registrar to the address given in Step D.

The Board of Directors will notify you via email of its scholarship decision by April 30, 2024.



FOR OFFICIAL USE ONLY
[ ]Completed Application
[ ] 300 Word Essay
[ ] 2 Recommendations
[ ] IRS 1040
[ ] Transcript of Grades

# HIGH SCHOOL GRADUATING SENIOR Arts Scholarship Application For College Year 2024-2025

Candidate's Name				
Candidate's Street Address	_	Candidate's Cit	y/State/Zip Code	
Candidate's Telephone Number (Where you can mos	st easily b	e reached.)		
Candidate's Email Address (Be certain this is legible	e.)			
Candidate's Date of Birth		Candidate's Social Security Number		
High School Currently Attending	Guidance Counselor's Name			
Candidate's Cumulative Unweighted Grade Point Av (Must be 3.0 or higher for consideration)	– verage	Candidate's Cur	mulative Weighted Grad	e Point Average
1. List any extracurricular activities/hobbies				
2. Are you employed during the school year? Yes_				
3. Do you work in the summer? Yes No	Numb	per of hours per v	veek	
4. To which Colleges have you applied or plan to applied	Accept	ed Annual No Tuition	Living Plans ( Campus Ap	(Circle one) ot. At Home
College		ed Annual No Tuition	Living Plans ( Campus A <sub>I</sub>	(Circle one) ot. At Home
College		ed Annual No Tuition	Living Plans ( Campus Ap	(Circle one) ot. At Home
5. What is your intended college major/ field of study	y in the ar	ts?		

## **HIGH SCHOOL GRADUATING SENIOR Arts Scholarship Application For College Year 2024-2025.**

6. Have you already been awarded finar	icial aid/scho	olarships? Yes No	
If yes, list the sources and the amounts			
7. Do you have other family members in			
Relationship	Age	Name of College	Year
8. Father/Stepfather's Name		His Occupation	
9. Mother/Stepmother's Name		Her Occupation	
10. Live with FatherMother	Other	Other's Relationship	
11. Street Address of person with whom	you live		
City/State/Zip Code			
12. Parents are: Married Divorce	d Sep	parated Single Widowed	
13. Name and telephone number of a co	ntact besides	s yourself who can be reached anytime.	
Name		Telephone	
14. Please read the following and ack	knowledge	acceptance with your signature on the line	below:
	any chang	eceive from The Woman's Exchange is ge to a major other than one in the art ge if any such change occurs.	
Signature		Date	

Application: Page 2 of 2