



Marion County Seminole Club, Inc.

P O Box 5771

Ocala, Florida 34478-5771

marionseminoleclub@gmail.com

RE: Marion County Seminole Club Jim Kirk Annual Scholarship
Named in honor of Country Jim Kirk for his years of dedication and service to Florida State University.

Dear Student,

Congratulations upon your acceptance to The Florida State University. We received information from the Florida State Admissions Office reflecting that you have been accepted. Each year the Marion County Seminole Club Selection Committee selects several students from the group of qualified applicants for our annual scholarship. While the number of scholarships may vary from year to year, the Club awards scholarships of \$1000.00 .

Qualified applicants are all newly accepted students to Florida State University. Incoming freshmen as well as community college transfers may apply. The decision criteria will be based on four categories: G.P.A., ACT & SAT scores, Citizenship, and Need. All applicants must be from Marion County.

Please complete this application and return it to:

MCSC / Jim Kirk Scholarship

P.O. Box 5771

Ocala, FL 34478

All applications should be postmarked no later than **May 5, 2017** . The scholarships will be awarded for the fall semester and made available through the FSU Financial Aid office. If you have any questions regarding the scholarship or filing deadline, I can be reached at 629-6582 after 5.p.m or by e-mail at MZAlex@aol.com or marionseminoleclub@gmail.com

Best of Luck,

Melanie Z. Alexander

Marion County Seminole Club, Inc.



Jim Kirk / Marion County Seminole Club Annual Scholarship Application

Congratulations upon your acceptance to Florida State University. Qualified applicants applying for this scholarship must be a Marion County resident and complete the following application. Qualified applicants are those students who are newly accepted for fall and/or summer terms to attend FSU. Newly accepted students may enroll directly from high school or transfer from a community college. Scholarships are awarded for the next fall semester.

Please complete all sections of the application. Failure to complete any section of the application may result in an incomplete score.

Last Name _____ *First Name* _____ *MI* _____

FSUUN # _____ *Phone #* _____ *Email* _____

Address _____

Date of Birth ___/___/___ *# of Family Members:* _____ *How many currently enrolled in college?* _____

Have any of your family members attended FSU?(list name & relationship) _____

Range of Family Annual Gross Income: _____ *Under \$30,000* _____ *\$31,000 - \$45,000*
_____ *\$46,000 - \$65,000* _____ *\$66,000 - \$85,000*
_____ *Above \$86,000*

High School _____ *Year Graduated* _____

Community College (for transfer student) _____

High School GPA _____ *Weighted* _____ *SAT Score* _____ *ACT Score* _____

Are you in an IB or Honors Program ? _____

Term you will enter FSU _____ *Planned Major* _____

Have you worked during High School? ___ Yes ___ No *If yes, number of hours per week* _____

Employer(s) Use additional page if necessary _____

Automobile _____ *Registered Owner* _____
Year Make Model Value

Please answer the following questions; limit your responses to 1 page for each question.

PERSONAL RESOURCES FOR COLLEGE

How do you plan to finance your college education? Please explain any special circumstances or information that you think the scholarship committee should know about you? Information can be kept confidential. Attachment #1

ACTIVITIES AND COMMUNITY INVOLVEMENT

- 1. Why did you want to attend FSU? How will attending FSU help you achieve your life's goals? Attachment #2*
- 2. Please list your extracurricular activities and the total volunteer hours and the organizations you assisted. Don't be modest; this will be used to determine your activities score. Attachment #3*
- 3. Why do you feel you are the most qualified for this scholarship? OR How have your extracurricular activities helped prepare you for your college future. Attachment #4*
- 4. Other than financially- after you graduate how do you plan to give back to Florida State University? Attachment #5*

I certify the all of the information is true and correct to the best of my knowledge.

Signature _____

Your Check list (what you need to send to us)

_____ Original Application + 5 Attachments (please keep a copy for yourself)

_____ Make sure your name is on ALL attachments

You do not need to send transcripts

*Mail to: MCSC / Jim Kirk Scholarship
P.O. Box 5771
Ocala, FL 34478*