



# Broward Ebony Golf Association, Inc.

## Scholarship Award Application

*All information must be completed and typewritten.*

Date of Application: \_\_\_\_\_

### Personal Data

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

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

\_\_\_\_\_

Telephone: \_\_\_\_\_ (Home) \_\_\_\_\_ (Cell)

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

No. of Sibling: \_\_\_\_\_ At Home \_\_\_\_\_ Age \_\_\_\_\_

No. of Sibling \_\_\_\_\_

In College \_\_\_\_\_ Name of School(s) \_\_\_\_\_

Yearly Family Income: (check one)

- \_\_\_\_\_ Under \$15,000
- \_\_\_\_\_ 15,001 - \$25,000
- \_\_\_\_\_ 25,001 - \$30,000
- \_\_\_\_\_ 35,001 - \$50,000
- \_\_\_\_\_ \$Over \$50,000

Are you employed: \_\_\_\_\_ Yes \_\_\_\_\_ No

If so, where? \_\_\_\_\_ Position: \_\_\_\_\_

**To All Applicants:**

The scholarship grant will be awarded on the best qualified.

No scholarship grant will be awarded **AFTER THE DEADLINE.**

Scholarship grants will be awarded to high school Seniors who have been accepted to a college, university or post secondary institution and show proof of same, i.e. letter of acceptance from institution .

All scholarship grant application must be completed with the signatures of the student's, Principal, BRACE Advisor, AND Parent/ Guardia regardless of the age of the student.

Check will be written individual student upon receipt of institution letter of acceptance.

Spelling and grammatical errors will be considered in the review of each application.

All recipients are required to perform a minimum of 25 hours of approved community service with written proof of the same. Scholarship grant will not be distributed until all community service hours have been completed and documented.

Broward Ebony Golf Association, Inc. (BEGA) reserves the right to photograph the scholarship recipient for future potential use . All photos will remain the property of BEGA and may be used for publicity and/or promotional purposes **ONLY.**

I, \_\_\_\_\_ attest that all information herein is accurate and is submitted in good faith for consideration as Broward Ebony Golf Association, Inc. scholarship grant applicant.

\_\_\_\_\_  
Signature of Application

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent of Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of BRACE Advisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Principal

\_\_\_\_\_  
Date

*This is a non competitive scholarship grant. Your competition is time.*

*The absolute deadline is: **May 1, of calendar year***

You must mail your original completed application to:

Broward Ebony Golf Association, Inc.

Post Office Box 249

Fort Lauderdale, Florida 33302

**THERE WILL BE NO EXCEPTIONS**

*Any student may apply regardless of color, creed, race, religion, national origin or gender.*

[www.browardebonygo/f.org](http://www.browardebonygo/f.org)

## **NARRATIVE**

All information must be completed and typewritten.

### **Goal/Interests**

#### **Why should you be selected?**

- Indicate your goal for the future. Your responses should include educational, professional and personal aspirations.
- Indicate how you will use this scholarship grant and any other significant points you wish to be considered.
- Minimum of 500 words
- Must be typewritten

**Scholarships/Grants/Loans Applied For  
During the Current School Year**

Pell Grant                    \_\_\_\_\_ Yes                    No    Date Applied: \_\_\_\_\_

Florida Student Grant                    \_\_\_\_\_ Yes                    No    Date Applied: \_\_\_\_\_

Bright Future Grant                    \_\_\_\_\_ Yes                    No    Date Applied: \_\_\_\_\_

Florida Academic Scholar                    \_\_\_\_\_ Yes                    No    Date Applied: \_\_\_\_\_

Florida Gold Seal                    \_\_\_\_\_ Yes                    No    Date Applied: \_\_\_\_\_

Florida Medallion Scholar                    \_\_\_\_\_ Yes                    No    Date Applied: \_\_\_\_\_

Other                    \_\_\_\_\_

Scholarships Previously Awarded:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

College(s) applied to and Acceptance Approval:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Extracurricular Activities

- Describe your extracurricular involvements. Indicate date, offices held and natures of activity

### Community Service

- Describe any community service activities or organizations you may be engaged with and indicate the depth of your involvement.

### Achievements

- What achievements have you attained? Include honors, awards, recommendations, acknowledgments, etc.

### Sport Activities

Golf : \_\_\_\_\_ Yes \_\_\_\_\_ No Handicap: \_\_\_\_\_

Basketball : \_\_\_\_\_ Yes \_\_\_\_\_ No Handicap: \_\_\_\_\_

Football : \_\_\_\_\_ Yes \_\_\_\_\_ No Handicap: \_\_\_\_\_

Others : \_\_\_\_\_

## Academic Data

Graduating High  
School \_\_\_\_\_

Anticipated  
Graduation Date: \_\_\_\_\_

GPA (Weighted): \_\_\_\_\_ GPA (Unweighted): \_\_\_\_\_

Class Rank \_\_\_\_\_ Class Size: \_\_\_\_

FCAT Scores:

Reading \_\_\_\_\_

Math \_\_\_\_\_

Date Taken \_\_\_\_\_

SAT Scores:

Verbal \_\_\_\_\_

Math \_\_\_\_\_

Date Taken \_\_\_\_\_

ACT Scores

Total Battery \_\_\_\_\_

Date Taken \_\_\_\_\_

*Please list the college(s), university (ies) or other post-secondary institutions (s) you have applied to or plan to attend. List all possibilities.*

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

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\_\_\_\_\_



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