

## LINLY HEFLIN SCHOLARSHIP APPLICATION

### APPLICANT INSTRUCTIONS

The Linly Heflin Scholarship Committee grants four-year scholarships in the amount of \$2500 per year to a limited number of applicants who have both significant economic need and a sound academic record. Scholarships are restricted to Alabama women attending a four-year Alabama college. The completed application form and supporting documents must be mailed to the Linly Heflin office and must be **postmarked by January 15, 2010**.

**Please check that the following documents are included:**

- \_\_\_\_\_ A personal statement describing yourself and your educational goals.
- \_\_\_\_\_ A copy of your high school or college transcript including the Fall 2008 transcript. If your most recent Fall transcript is not available by the deadline, it can be sent separately. Please indicate when it will be sent: \_\_\_\_\_
- \_\_\_\_\_ Two letters of recommendation from teachers or adult friends.
- \_\_\_\_\_ A small photograph, approximately 2" x 3", with your name on the back.
- \_\_\_\_\_ A copy of your family's most recent Federal Income Tax Return.

**Any application not including all of the above items will be considered incomplete and will not be considered in the review process.** Applications must also be **postmarked no later than January 15, 2010** to be considered. Send applications to:

**Linly Heflin Scholarship Committee  
13 Office Park Circle  
Suite 8  
Birmingham, AL 35223**

The Scholarship Committee will review your application and notify applicants who are selected for interviews by March 1<sup>st</sup>. Interviews will be held in Birmingham, AL on Saturday, March 27, 2010 between 9:00- 12:00 p.m.

Please direct any questions to the Linly Heflin Scholarship Co-Chairman at 205-871-8171.

# LINLY HEFLIN SCHOLARSHIP APPLICATION

## I. PERSONAL INFORMATION

Name: Miss/Mrs. \_\_\_\_\_  
(First) (Middle) (Last)

Preferred Name \_\_\_\_\_ Social Security No. \_\_\_\_\_

Home Address \_\_\_\_\_  
Street

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Are you a U.S. citizen? \_\_\_\_\_ Alabama resident? \_\_\_\_\_

Have you applied for a Linly Heflin Scholarship before? Yes \_\_ No \_\_ Year \_\_\_\_\_

Were you a Linly Heflin 2009 grant recipient? Yes\_\_ No\_\_

## II. SCHOOL INFORMATION

Current High School or College \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Counselor's Name \_\_\_\_\_ School Phone \_\_\_\_\_

GPA \_\_\_\_\_ Class Rank \_\_\_\_\_ If #1, how many in your class are #1? \_\_\_\_\_  
Class Size \_\_\_\_\_

ACT \_\_\_\_\_ SAT \_\_\_\_\_ (Verbal \_\_\_\_\_ Math \_\_\_\_\_ Writing \_\_\_\_\_)  
(Must be 23 or above)

Year of High School Graduation \_\_\_\_\_

College Attended, if any \_\_\_\_\_

Choice of Alabama College for Linly Heflin Scholarship \_\_\_\_\_

Have you applied for admission? \_\_\_\_\_ Have you been accepted? \_\_\_\_\_

Fall 2010 Class: Freshman \_\_\_\_\_ Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior \_\_\_\_\_

Proposed Major \_\_\_\_\_

Honors and Activities in High School or College (You may attach a resume or an additional sheet if more space is needed):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are your hobbies? \_\_\_\_\_  
\_\_\_\_\_

### III. FINANCIAL INFORMATION

Information regarding those with whom you live: Parents/Guardians or Spouse

Father/Guardian \_\_\_\_\_  
Education Level \_\_\_\_\_  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Gross Annual Salary \_\_\_\_\_ Additional Income \_\_\_\_\_

Mother/Guardian \_\_\_\_\_  
Education Level \_\_\_\_\_  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Gross Annual Salary \_\_\_\_\_ Additional Income \_\_\_\_\_

Spouse (if applicable) \_\_\_\_\_  
Education Level \_\_\_\_\_  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_  
Gross Annual Salary \_\_\_\_\_ Additional Income \_\_\_\_\_

Members of immediate household supported by parents/guardians:

Name	Age	Relation	School/Grade	Scholarships (if any)
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimate of parents'/guardians' contribution to college expenses per year  
\$ \_\_\_\_\_

If parents are separated or divorced, will you receive assistance from the parent with whom you do not live? \_\_\_\_\_ If yes, how much? \_\_\_\_\_

Amount other relatives will contribute to your college support \_\_\_\_\_

Amount spouse will contribute to your college support \_\_\_\_\_

Do your parents own their own home? \_\_\_\_\_

Are there any extraordinary expenses in your family? (illness, debts, etc.) Explain:

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Will you be receiving PACT funds? \_\_\_ Yes \_\_\_ No If yes, total amount \_\_\_\_\_

Have you completed or plan to complete the FAFSA Federal Aid application?  
\_\_\_ Yes \_\_\_ No

Please list any other scholarship aid you have been granted:

Scholarship/Grant \_\_\_\_\_ Amount \$ \_\_\_\_\_ 1year? \_\_\_ 4 years? \_\_\_

Scholarship/Grant \_\_\_\_\_ Amount \$ \_\_\_\_\_ 1year? \_\_\_ 4 years? \_\_\_

Scholarship/Grant \_\_\_\_\_ Amount \$ \_\_\_\_\_ 1year? \_\_\_ 4 years? \_\_\_

Have you applied or been recommended for other scholarships? \_\_\_\_\_ If yes, please list below:

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Full or part-time jobs you have had or currently have:

<u>Employer</u>	<u>Dates</u>	<u>Hrs/week</u>	<u>Salary</u>
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Do you plan to work while in school? \_\_\_\_\_ Live at home? \_\_\_\_\_

**We, the undersigned, certify that the information we have submitted is true and correct.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date