

**BREVARD SEMINOLE CLUB
SCHOLARSHIP APPLICATION**

Full Name: _____ Date: _____
Mailing Address: _____
City: _____ State: _____ Zip Code : _____
Phone Number: _____ Email Address: _____
Current High School: _____ Graduation Date: _____
Current Weighted GPA: _____ Current Un-weighted GPA: _____
SAT: Reading: _____ Math: _____ Composite: _____
Term you will enter FSU: _____ Planned Major _____
Do you have any family members who graduated from FSU? _____
Who? _____

Describe any recognition received while in high school: (academic, community, extracurricular activities)

List any community service completed while in high school: Total Hours: _____
Activities: _____

Applicant agrees that by submitting this application they are giving permission for the scholarship committee to examine and verify all information.

CHECKLIST FOR ITEMS TO INCLUDE	PLEASE MAIL COMPLETED APPLICATION
<input type="checkbox"/> COMPLETED APPLICATION	WITH ALL REQUIRED ITEMS TO:
<input type="checkbox"/> ACADEMIC TRANSCRIPTS	
<input type="checkbox"/> COPY OF FSU ACCEPTANCE LETTER	BREVARD SEMINOLE CLUB
<input type="checkbox"/> ESSAY, ONE PAGE MAX	386 HALEY COURT
<input type="checkbox"/> LETTER OF RECOMMENDATION	MELBOURNE, FLORIDA 32940
DO NOT INCLUDE PHOTOGRAPHS	

APPLICANT'S SIGNATURE: _____ DATE: _____

Please feel free to provide any additional information to support your application on the back of this page or on a separate piece of paper.