

**The Community Foundation of the Eastern Shore
William T. Burbage Family Memorial Scholarship**

- A. Choice of School: Accredited four-year college or university, or accredited two-year institution.
- B. Who May Apply: Graduating seniors of Stephen Decatur High School, who have selected their college and have been accepted for admission as a full-time student.
- C. Considerations: Applicant must have a 3.0 GPA. Participation in leadership activities, in addition to consideration for activities that suggest pride in their school. Consideration may be given to work experience as a substitute for extracurricular activities.
- D. Nature of Award: minimum of \$1,000 for one academic year.
- E. How to Apply: Applications are available at High School guidance office or at www.cfes.org. Completed applications must be submitted to the guidance office. An application is complete, and considered for a scholarship award, only when the following have been submitted:
 - 1. A completed scholarship application
 - 2. Official high school transcript of grades
 - 3. Letter of acceptance from college or university
 - 4. Two letters of recommendation from non-family members – one for academics and the other for leadership.
 - 5. Detailed listing by high school year of activities, positions held and overall involvement in school and community.
 - 6. An essay explaining how growing up on the Eastern Shore has contributed to your individual leadership style and helped you to achieve your personal goals.

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Student Name _____
Last First M.I.

Permanent Address _____
Street

City State Zip
Telephone () _____ **Social Security Number** _____

Email Address: _____

How long have you been a resident of your County? _____

High School _____ **Graduation Date** _____
Month/Year

_____ () _____
Address Telephone

College or University for which aid is requested _____

_____ () _____
Address Telephone

Entrance Date _____

List Extracurricular Activities, Work experience, Community service, Volunteer projects in which you have participated (attach additional sheet if necessary):

I certify that I am a legal resident of Worcester County, State of Maryland and that all information on this form is true and complete to the best of my knowledge.

Students Signature Date Parent's Signature Date