

NC COOPERATIVE EXTENSION-LINCOLN COUNTY
\$2,500 GEORGE A. STOUDEMIRE MEMORIAL SCHOLARSHIP
Application Form

Stoudemire applicants may be a Lincoln County high school senior or college student. The Stoudemire Scholarship gives preference to students majoring in agriculture, natural resources, forestry, family and consumer sciences, or other fields closely related to the work of Cooperative Extension.

This scholarship may only be used for universities or colleges in North Carolina.

**** This application must be received in the Extension Office by the close of business on January 31st. You may mail it, along with your transcript and reference letters, to the address at the end of this application or deliver it in person to the Extension Office on the first floor of the James W. Warren Citizens Center in Lincolnton. For more information, call 704-736-8461.**

I. PERSONAL AND FAMILY INFORMATION

Full Name: _____

Last

First

Middle

Mailing Address _____

Street

City

State

Zip Code

E-Mail _____ Telephone _____

Father's Name _____

Mother's Name _____

Estimated Annual Family Income (from all sources) _____

Number of Other Children in Family _____

How many brothers and sisters will be in public school? ____ In college or university? ____

II. SCHOLASTIC INFORMATION

Schools Attended _____

List extra-curricular school activities:

Offices held in school organizations or in class: _____

Honors and awards in school: _____

Out of school activities, offices held and awards: _____

List in order of your preference the majors you are considering:

a. _____ b. _____

c. _____

List in order of your preference the three institutions of higher learning you are most interested in attending. Circle those at which you have been accepted:

a. _____ b. _____

c. _____

III. ADDITIONAL INFORMATION

Position held in gainful employment: _____

Have you already been awarded a scholarship of any kind? _____

If so, name scholarship: _____

For what amount? _____

For what other scholarship(s) have you applied? _____

What do you estimate your total expense to be for the next regular academic year (August to May) _____ ?

Of that amount, how much will you probably receive from your parents and other sources not including scholarships _____ ?

IV. BRIEFLY DESCRIBE YOUR PARTICIPATION IN 4-H OR OTHER COOPERATIVE EXTENSION PROGRAMS:

V. LETTERS OF REFERENCE AND HIGH SCHOOL/COLLEGE TRANSCRIPT:

Attach at least three letters of reference (do not use relatives) in support of your application and your high school/college transcript.

VI. BRIEFLY DESCRIBE YOUR CAREER GOALS:

Applicant's Signature

Date

Parent's Signature

Date

Return by mail to:

**N.C. Cooperative Extension Service
115 West Main Street
Lincolnton, NC 28092**

OR

Return in person to:

**N.C. Cooperative Extension Service
James W. Warren Citizens Center, First Floor
Lincolnton, NC**



Applications, including your transcript and letters of reference, must be received by the close of business on January 31st (or the next business day if January 31 falls on a weekend). For more information, call 704-736-8461.