# NORTH CAROLINA COTTEY COLLEGE SCHOLARSHIP APPLICATION

Application Deadline for Fall Semester Awards: February 15 (Annual Award, paid in two installments: one each for Fall and Spring Semesters)

Application Deadline for Spring Semester Awards: October 15 (1/2 Annual Award, for students beginning in Spring Semester)

Instructions: Sign and email this application to the North Carolina Cottey College Scholarship Fund (NCCCSF) Board of Trustees at <a href="mailto:nccsf@peonc.org">ncccsf@peonc.org</a>. Please include the essay requested below. You will be notified when your application is complete with personal letters of reference and the P.E.O. Chapter Letter of Recommendation received.

# **DO NOT SEND THIS APPLICATION TO COTTEY COLLEGE**

Applicant Information			
Name			
Last	First	Middle	Preferred Name
Address			·
City		State	Zip
Phone		Cell Phone	
Email			
			_
High School		City	
Date of GED or High So	chool Graduation	Actual or Anticip	ated
Enrollment Informatio	n		
Date of Acceptance at 0	Cottey College:		
Planned Semester/Yea	r to Start Attending Cottey:	Fall Spring	Year
Admission Category: F	reshman Transfe	r Readmit	
Number of college cred	its previously earned (if app	licable):	
Enrollment Status: Full	Time Student Pa	rt Time Student	_
Cottey Degree Plan: As	ssociate's Degree Ba	achelor's Degree	_
Intended Major:			OR Undecided:

### **Essay**

Please attach an essay of 250-500 words describing your plans to further your education, why you would like to attend Cottey, and the talents, experiences or character qualities that you would bring to Cottey.

#### References

Two letters of reference from people **not related to you** are required and are to be sent by the person providing the letter of reference directly to the NCCCSF Board of Trustees Chairman at NCCCSF@peonc.org .

#### **Awards and Activities Information**

Please describe your principal extracurricular activities while in high school, including any work and volunteer experience. Please do not use acronyms. Attach additional pages if needed.

Organization	Activity/Participation/Office Held		Years of Participation
			<del></del>
Special Honors/Reco			
Local Sponsoring P.	E.O. Chapter Informa	ation	
Chapter Letters/City:	/		
Chapter Contact Infor	mation: President	<b>or</b> Cottey Committee Cha	irman
Chapter Contact Nam	e:		
Phone:		Cell Phone:	····
Email address:			

### **Certification and Authorization**

I agree to provide updated GPA information each semester for renewal consideration. A GPA of 2.5 is required. The award amount may be adjusted annually for grade achievement. Students on academic probation will not be considered for scholarship renewal. I will notify the NCCCSF Board of Trustees if I am not eligible for renewal.

I certify all statements in this application are factually correct and honestly presented. I understand that failure to provide true and complete information could mean withdrawal of scholarship monies. I authorize the release of this information to the P.E.O. North Carolina State Chapter and the sponsoring local chapter of The P.E.O. Sisterhood.

Applicant Name (Printed):					
Applicant Cignoture	Data				
Applicant Signature:	Date:				