

**VIRGINIA DEPARTMENT OF EDUCATION
GRANVILLE P. MEADE SCHOLARSHIP APPLICATION**

SECTION I

(To be completed by applicant)

Please Print

Name _____
Last First Middle

Home Address _____ (____) _____
Number and Street Phone

City/County State Zip Code Social Security No.

Place of Birth _____ Date of Birth _____
(City, State)

High School Now Attending _____

School Address _____
Number and Street Phone

City/County State Zip Code

Graduation Date _____ Class Rank _____ No. in Class _____

SAT/ACT _____ When Taken _____
Score

**Note: An official transcript of your high school work and standardized record
MUST accompany this application.**

Expect to enroll in _____
College/University

Address of College/University

City State Zip Code

Career Objective _____
(teacher, doctor, lawyer, engineer, etc.)

Extracurricular activities including honors and awards

Athletics

Work experience last summer

What part-time or after-school work have you done?

Why do you desire to attend college?

Have you received other scholarships?

Scholarship _____ Amount \$ _____

Scholarship _____ Amount \$ _____

Date

Signature of Applicant

SECTION II

(To be completed by parent or guardian)

Parents: (If either or both parents are deceased, so indicate)

Father's Name _____ Age _____

Address _____
Number and Street

City/County State Zip Code

Occupation _____ Approx. Annual Income \$ _____

Mother's Name _____ Age _____

Address _____
Number and Street

City/County State Zip Code

Occupation _____ Approx. Annual Income \$ _____

Guardian's Name _____ Age _____

Address _____
Number and Street

City/County State Zip Code

Occupation _____ Approx. Annual Income \$ _____

Number of family members other than yourself and applicant

Ages _____

No. in school _____ No. presently attending college _____

No. who are self-supporting _____

Amount parents or guardian can provide annually toward applicant's college expenses \$ _____

Amount that may be available annually from other sources

Other relatives	\$ _____
Trust funds	_____
Applicant's savings	_____
Applicant's summer employment	_____
Any other	_____

Are there any unusual circumstances that curtail the family income or increase the family expenses? (Explain in detail)

Explain why the applicant cannot finance his/her college education without the assistance offered by the Granville P. Meade Scholarship.

Date

Signature of Parent or Guardian

SECTION III

Confidential letters of reference from at least four people not related to the applicant, including the applicant's high school principal, shall be filed with this application. These letters should give specific information in regard to the applicant's character, personality, and ability. Particular reference must be made to the applicant's need and the family's financial ability.