



**Edward Waters College
Scholarship Application**

1658 Kings Road
Jacksonville, FL 32209

Student Name: _____

Address: _____

Birthdate of Student: _____ **Male or Female:** _____

College Classification _____

Phone- Cell: _____ **Home:** _____

Email: _____

What is your Major field of study? _____

What is your anticipated graduation date? _____

What are your career goals? _____

List work or extracurricular activities in which you have participated:

Please attach a separate document explaining why you need this scholarship? (Limit 200 words)

I certify that the information provided on this form is true to the best of my knowledge, and I grant permission for the information contained in this document as well as other official academic information to be shared with the scholarship donor(s). I further understand that it is my responsibility to write a thank you note to the scholarship donor(s).

Student Signature

Date

-----Administrative Use-----

Scholarship Amount Granted: \$ _____

Source of Funds (for acknowledgement letter): _____