

**First Coast Diversity Council - Robert Austin Scholarship Fund   
Recognizing Future Leaders in Diversity**

**Scholarship Application Form**

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| **All Scholarship applications must be submitted through the FCDC e-mail -**[*info@firstcoastdiversity.org*](mailto:info@firstcoastdiversity.org). **FCDC’s website** <http://firstcoastdiversity.org> **offers guidance on** **requirements for scholarship application and member companies. All documentation provided during this application process will become the sole property of First Coast Diversity Council.** | |
| **I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby confirm that all information provided in this scholarship application is true and accurate to the best of my knowledge and belief. I affirm that information included in this application, including essay is official work of candidate.** |

**Date:\_\_\_\_/\_\_\_\_/\_\_\_\_ (dd/mm/yyyy) Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| --- | --- | --- | --- | --- | --- |
| 1 | | Last Name: Middle Initial: | First Name: | | |
| 2 | | Permanent Mailing Address Street:  City: State: Zip: | | | |
| 3 | | Address at school (if different) Street:  City: State: Zip: | | | |
| 4 | | Daytime Telephone Number: ( )   Email Address: | | | |
| 5 | | Date of Birth: Month\_\_\_\_\_\_\_\_\_ Day \_\_\_\_\_\_\_\_\_\_\_ Year \_\_\_\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_\_\_\_\_\_   Gender: | | | |
| 6 | | Are you the first person in your family to go to college: YES\_\_\_\_\_\_\_\_\_\_\_\_ NO\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| 7 | | College/University:  College/University Cashier Telephone Number: ( )   Address of Office of Student Financial Affairs (Cashiers Office) Street:  City: State: Zip: | | | |
| 8 | | Cumulative Grade Point Average (GPA): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (On a 4.0 scale)  Please circle: Part time / Full time  **Attach proof of GPA. Your most recent school transcript is required.** | | | |
| 9 | | Type of Degree sought: Associate / Bachelors Expected Date of Graduation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Please circle) | | | |
| 10 | | Major (s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Minor/Concentration(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| **List college and/or high school activities (student government, sports, publications, school sponsored community programs, student-faculty committees, arts, music, etc.). List in descending order of significance.   Activity Date  1)  2)  3)  4)  5)  6)** | | | |
| **APPLICATION CHECKLIST** | | | |
| Completed and Signed application form | | | Yes / No |
| Minimum of 1,000 words double spaced essay highlighting ways in which candidate idea of diversity influenced their leadership within the community/school | | | Yes / No |
| Recommendation Letter from Community Leader | | | Yes / No |
| Recommendation Letter from Manager of First Coast Diversity Council Member Company | | | Yes / No |
| Recommendation Letter from 1 Professor/Teacher | | | Yes / No |
| School Transcript | | | Yes / No |

**REMINDER:**

**The deadline for this application to be received by**

**April 30th, 2014 – 8:00 p.m. NO EXCEPTIONS!**