



Dear Scholarship Applicant,

Thank you for applying for one of our scholarships. Your interest in furthering your education is a tribute to you, your family, school and community. We applaud you for your efforts to excel as you work toward a higher level of education.

To ensure that all candidates are evaluated by the same criteria, we ask that you complete and return ALL of the following by **March 31**. Please submit the following information in typewritten form. Application may be reproduced.

Part I: Personal Data Form (attached)

Part II: A High School Transcript

Part III: Recent Photograph

Part IV: Two Letters of Recommendation (educator and a community person)

Part V: Biographical sketch (including inspirations and career aspirations)

Part VI: An Essay of at least 500 words on 1 of the following topics

1. *What are some practices you would suggest to combat childhood obesity in your culture? Why do you think it is an issue?
2. If you had the opportunity to spend the day with someone from African-American history, who would it be and why?
3. Who speaks for your generation TODAY and what are they saying? If your answer is 'no one' then what would YOU say about your generation?
4. What three things would you recommend changing about our educational system to improve it for FUTURE students? Why?

Part VII: A copy of College/ Vocational School Acceptance Letter

Our prayers are with you as you close this chapter of your life and embark upon a new and exciting challenge. Please be reminded, the above information must be **POSTMARKED** no later than **March 31**. **DO NOT** hand deliver your application to any member of the Wanda and Janice Wilson Foundation.

Please mail your completed packet to:

**Wanda and Janice Wilson
Foundation
P.O. Box 291526
Port Orange, Florida 32129**

\$500.00 Per Semester and must provide class schedule.

Name: _____ Date of Birth: _____

Address:

City/State: _____ Zip: _____

Phone Number: (____) _____ Cumulative Grade Point Average: _____
Weighted/ un-weighted

High School Attended:

Date of Graduation: _____

Parent(s)/ Guardian(s):

Community Organization(s):

School Organizations:

Leadership Roles:

College/ Vocational School to the Attended: Accepted?

Have you received any financial Aid/Awards? Yes _____ No _____

Please list the Financial Aid/Awards that you have received.

Applicant's Signature

Parent's/ Guardian's Signature