



**DEMOCRATIC WOMEN'S CLUB  
OKALOOSA COUNTY FLORIDA**

**SCHOLARSHIP 2019  
SCHOOL VERIFICATION AND RECOMMENDATION FORM**

This form should be completed by the counselor, or an authorized representative, of the school. It should be attached to the student's completed application, which the student should mail with a postmark no later than April 1, 2019. **Please note: your counselor may choose to mail this form, in which case you should confirm that it has been completed and mailed.**

**NAME:** \_\_\_\_\_ **HIGH SCHOOL:** \_\_\_\_\_

**Number in Graduating Class:** \_\_\_\_\_ **Class Rank:** \_\_\_\_\_ **GPA:** \_\_\_\_\_

**Test Scores (ACT, SAT as applicable):** \_\_\_\_\_

**Attendance Record (Explain excessive absences):** \_\_\_\_\_  
\_\_\_\_\_

**Guidance Counselor:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

**Counselor's Recommendation:** Yes \_\_\_\_\_ No \_\_\_\_\_

**Additional Comments:**

\_\_\_\_\_  
**Counselor's Signature**



## **DEMOCRATIC WOMEN'S CLUB OKALOOSA COUNTY FLORIDA**

### **SCHOLARSHIP GUIDELINES 2019**

**Purpose:** To assist Okaloosa County students at college entry in achieving educational goals and to foster democratic ideal and the importance of the political process.

**Eligibility:**

- Graduating Senior
- 2.5 Grade Point or higher GPA
- In need of financial support
- Political Science or related field (preferred)
- Recommendation from teacher or counselor
- Okaloosa County resident and U.S. Citizen
- No disciplinary problems
- Registered Democrat with copy of Voter's Registration form (Pre-Registration if under 18)

**Amount:** \$1000

**Application Requirements and Information:**

- Completed Application Form
- Request that a School Verification and Recommendation Form be completed by your counselor attached to your application and mail it by April 1 to: Ellen Holt, 1158 Muirfield Way, Niceville, FL 32578. Please note: your counselor may choose to mail this form, in which case you should confirm that it has been completed and mailed.
- Award will be presented at your school.
- Winner is requested to attend and be introduced at a Democratic Women's Club meeting.
- Winner's check will be sent to the college financial aid office upon enrollment.



**DEMOCRATIC WOMEN'S CLUB  
OKALOOSA COUNTY FLORIDA**

**SCHOLARSHIP 2020  
APPLICATION DETAIL**

**NAME:** \_\_\_\_\_ **HIGH SCHOOL:** \_\_\_\_\_

**Number in Graduating Class:** \_\_\_\_\_ **Class Rank:** \_\_\_\_\_ **GPA:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Parents/Guardian:** \_\_\_\_\_

**Occupation:** \_\_\_\_\_

**Address if different:** \_\_\_\_\_

**Number in Family:** \_\_\_\_\_ **Family Income: \$70K or less:** \_\_\_\_\_ **\$70K or more** \_\_\_\_\_

*(Use additional pages as necessary)*

**Additional Scholarships or grants received: Yes:** \_\_\_\_\_ **No** \_\_\_\_\_

**Honors and Awards received during High School:** \_\_\_\_\_

**Participation in School Activities and years:** \_\_\_\_\_

**Participation in Community Activities, names of organizations and description:** \_\_\_\_\_

**Employment (Summer jobs, after school, etc.). List Employers and dates:** \_\_\_\_\_

**College you plan to attend:** \_\_\_\_\_

\_\_\_\_\_  
**Student's Signature**

**Date:** \_\_\_\_\_



**DEMOCRATIC WOMEN'S CLUB  
OKALOOSA COUNTY FLORIDA**

**SCHOLARSHIP APPLICATION 2019**

*Please use a second page as necessary*

**1. Please state the reasons for your career choice and the goals you hope to accomplish.**

**2. Give your view on the "The Importance of the American Political System". Please discuss concepts of the system and not specific politicians.**

---

**Applicant's Signature**