

# Arkansas State Golf Association

## *Application for New Scholarship*

(Please Print or Type)

Name \_\_\_\_\_  
Last First Middle

Today's Date \_\_\_/\_\_\_/\_\_\_ Birth Date \_\_\_/\_\_\_/\_\_\_ Email \_\_\_\_\_

School Currently Attending \_\_\_\_\_  
Name City State

High School Attending/Attended \_\_\_\_\_  
Name City State

### TO ALL APPLICANTS:

For scholarship consideration, you must submit this completed application form, your official current grade transcript showing a cumulative grade point average on a 4.0 scale, two reference reports, and an additional report from the principal/dean or a counselor at the school you are now attending or have attended. **IMPORTANT: Each applicant must also provide a copy of a completed Federal Student Aid Form (FAFSA) OR a copy of parent/guardian's most recent 1040, pages 1 and 2. (All information in this scholarship application will be kept confidential.)**

If you are a graduating senior in high school, or if you have not attended one full year of college, your application must also include either your American College Testing Program (ACT) composite percentile, or your Scholastic Aptitude Test (SAT) math and verbal scores. These results should be submitted directly from your ACT or SAT or be photocopied onto your original transcript, as well as being entered on this application form.

*Your current transcript must be received by the Arkansas State Golf Association no later than March 1<sup>st</sup> of the calendar year in which you plan to attend college, and should be sent as early as possible. Please follow instructions on the enclosed letter.*

All other scholarship application materials, including the application form, reference reports, a principal/counselor report, **and financial disclosure** must be received by the ASGA no later than March 1<sup>st</sup>.

Materials should be mailed to:

Arkansas State Golf Association  
P.O. Box 30250  
Little Rock, AR 72260

# ARKANSAS STATE GOLF ASSOCIATION

## SCHOLARSHIP APPLICATION

Name \_\_\_\_\_ Gender: M\_\_ F\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_ Zip \_\_\_\_\_

Tel: (\_\_\_\_) \_\_\_\_\_ Birthdate \_\_/\_\_/\_\_ Social Security \_\_\_\_\_

Father's Name \_\_\_\_\_ Employer/Job Title \_\_\_\_\_

Father's  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_ Zip \_\_\_\_\_

Mother's Name \_\_\_\_\_ Employer/Job Title \_\_\_\_\_

Mother's  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_ Zip \_\_\_\_\_

Total No. of brother/sisters \_\_\_\_\_ No. of brothers/sisters at home \_\_\_\_\_ In college \_\_\_\_\_

Do any other dependents live with your parents? Please Specify \_\_\_\_\_

Your marital status \_\_\_\_\_ No. of children (If applicable) \_\_\_\_\_

Spouse Name \_\_\_\_\_ Employer/Job Title \_\_\_\_\_

Do you file an independent tax return with the Internal Revenue Service? \_\_\_\_\_

If so, do you claim any dependents besides yourself? \_\_\_\_\_ How Many \_\_\_\_\_

Have you held a part-time job (s) while attending school or during summers? \_\_\_\_\_

Job Title \_\_\_\_\_ Hours per week \_\_\_\_\_ Length of Employment \_\_\_\_\_

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Are you presently employed? \_\_\_\_\_ Do you plan to work this fall? \_\_\_\_\_

Do you contribute to household expenses? \_\_\_\_\_ If so, what percentage? \_\_\_\_\_

Year of High School Graduation \_\_\_\_\_

Do you have any information concerning your financial or home situation which might be pertinent to this application for scholarship aid? Please attach extra sheets if needed for this and subsequent answers.

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Reasons for seeking a college education: \_\_\_\_\_

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Career Plans: \_\_\_\_\_

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Other Goals: \_\_\_\_\_

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While attending college, will be living: At Home \_\_\_\_\_ On Campus \_\_\_\_\_ Other \_\_\_\_\_

Address while at college (If known) \_\_\_\_\_  
Street City State Zip

Confidential Report – References requested from:

1. Name \_\_\_\_\_ 2. Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Counselor or person to contact at my current school: Name \_\_\_\_\_

Title \_\_\_\_\_ Phone \_\_\_\_\_

**This information to be completed by graduating high school seniors or those who have completed less than one year of college:**

ACT College-Bound Composite Percentile \_\_\_\_\_ SAT Verbal Score \_\_\_\_\_ SAT Math Score \_\_\_\_\_

Achievements/Honors/Recognition (High School/College) \_\_\_\_\_

Extra-Curricular Activities \_\_\_\_\_

College you plan to attend next fall \_\_\_\_\_

Enrollment Date \_\_\_\_\_ Field of Study \_\_\_\_\_

Program Enrolled In: 2-year \_\_\_\_\_ 4-year \_\_\_\_\_ Other (specify) \_\_\_\_\_

Degree Sought \_\_\_\_\_ Anticipated College Graduation Date \_\_\_\_\_

Please indicate an estimate of your parents' (father's and mother's, if both work) and your total income for the last calendar year. Please include spouse's income, if married.

**PARENTS ESTIMATED INCOME**

- Under \$20,000
- \$20,000 - \$40,000
- \$40,000 - \$60,000
- \$60,000 - \$80,000
- \$80,000 - \$100,000
- Over \$100,000

**SELF/SPOUSE INCOME**

- Under \$20,000
- \$20,000 - \$40,000
- \$40,000 - \$60,000
- \$60,000 - \$80,000
- \$80,000 - \$100,000
- Over \$100,000

Please indicate by percentages the actual funds you have available for college expenses from the following sources:

Self/Spouse \_\_\_\_% Parents \_\_\_\_% Other Scholarships \_\_\_\_% Other (specify) \_\_\_\_%

Note: A 100% total would indicate that all college expenses are covered. Your total may be less than that amount.

Please list other scholarships or grants for which you are applying. If any of these scholarships or grants has already been awarded, please specify:

**All statements in this application are accurate to the best of our knowledge:**

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardians Signatures \_\_\_\_\_

Arkansas State Golf Association  
P. O. Box 30250  
Little Rock, AR 72260  
**CONFIDENTIAL REPORT – REFERENCES**

The student listed below has applied for a college scholarship from our association. Your Name has been given as a reference: any assistance in determining the worthiness of this student will be appreciated by our scholarship committee – and will be filed as strictly confidential. Your cooperation is requested in returning this form to the ASGA at the above address as soon as possible. In order for this applicant to be considered for a scholarship this report must be received by the ASGA no later than March 1<sup>st</sup>.

<b>Applicant to complete this information:</b>				
<b>NAME OF APPLICANT:</b> _____				
Last	First	Middle		
<b>Permanent Address:</b> _____				
Street	City	State	Zip	
<b>Phone ( )</b> _____ - _____		<b>Year of High School Graduation:</b> _____		
<b>High School Attended/Attending:</b> _____				
Name		City		

The following information is to be completed by a reference and returned directly to the ASGA at the above address.

What is your Association with the applicant? \_\_\_\_\_  
(Teacher, Employer, Neighbor, etc.)

How long have you known the applicant? \_\_\_\_\_

In your opinion is the above-named student fully qualified as to character, personality, leadership qualities, and scholastic achievements to merit consideration of an award of this kind? Please explain.

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What is your estimate of the applicant's ability and motivation in accomplishing college work?

- Superior
 Above Average
 Average
 May have difficulty

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

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Applicant to complete this information:

NAME OF APPLICANT: \_\_\_\_\_

Last

First

Middle

Permanent Address: \_\_\_\_\_

Street

City

State

Zip

Phone ( ) \_\_\_\_\_ - \_\_\_\_\_ Year of High School Graduation: \_\_\_\_\_

High School Attended/Attending: \_\_\_\_\_

Name

City

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Above Average

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May have difficulty

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

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Applicant to complete this information:

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Last First Middle

Permanent Address: \_\_\_\_\_  
Street City State Zip

Phone ( ) \_\_\_\_\_ - \_\_\_\_\_ Year of High School Graduation: \_\_\_\_\_

High School Attended/Attending: \_\_\_\_\_  
Name City

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- Superior       Above Average       Average       May have difficulty

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

# ARKANSAS STATE GOLF ASSOCIATION

## UNDERGRADUATE SCHOLARSHIP PROGRAM

### **Purpose of the program**

The Arkansas State Golf Association (ASGA) undergraduate scholarship program was established to assist deserving young people, who reside in Arkansas, in their pursuit of higher education at an accredited college or University.

Scholarship recipients may pursue any course of instruction leading to a bachelor's degree, or any other course of instruction meeting the committee's approval. Subject to the committee's discretion awards are renewable each semester during a regular four-year undergraduate college course. Awards for graduate study & two-year undergraduate schools are not provided.

### **Eligibility Requirements**

A scholarship recipient must be:

- Qualified to attend accredited college, University or educational institution of his/her choice. An accredited school under this program is defined as a non-profit institution of higher learning located in the United States and listed in the Educations Directory, Colleges and Universities, published by the U. S. Department of Education.
- A senior student attending high school in Arkansas or who is a full-time Arkansas resident with a 3.0 GPA or higher, or
- A student currently attending an accredited institution of higher education who has not graduated from a college or University and is not 25 years of age or older.

### **Responsibility and Criteria for Selection**

The committee will select scholarship award recipients on the basis of character, personality, leadership qualities, scholastic achievement, ability, financial need, and other criteria they deem necessary.

### **Amount and Payment of Scholarship Awards**

Awards will be granted in amounts determined by the committee. Payments will be made to the student's educational institution in August of the academic year for which the scholarship is awarded. Scholarship awards may be drafted by the student for payment of tuition and fees, on-campus housing and meals, or books and materials purchased through an on-campus bookstore. If your college or University does not have on-campus housing or meal service, please indicate so on your applications.

### **Rules for Scholarship Recipients**

Scholarship recipients will conduct all negotiations regarding admission to their chosen institution of higher learning. They must be accepted and enrolled during the semester for which the award is granted.

Any delay or acceleration in a student's normal academic program must be approved by the committee on the basis of a written request from the student.

All requests for transfer must be submitted in writing for approval by the committee.

Scholars must maintain a cumulative GPA of 2.75 to retain their scholarship.

Scholars are required to furnish, and authorize their institutions to furnish any information the committee deems necessary in the management of this program.

### **Application Procedures for New Scholarships**

Students may obtain application packets by writing to the Arkansas State Golf Association, #3 Eagle Hill Court, Suite B, Little Rock, AR 72210 or may print it at [www.asga.org](http://www.asga.org). Students are urged to request the application no later than February 1<sup>st</sup> of the year in which the scholarship would be used, because March 1<sup>st</sup> is the deadline for this information to be received by the ASGA.

Application packets contain a letter of instructions, an application form, and a confidential report from to be completed by the principal or a counselor at the student's current school and two forms to be completed as confidential letters of reference.

It normally takes several weeks for students, their schools and references to complete the information required for a scholarship application. It is to the student's advantage to obtain forms and schedule ACT or SAT tests as early as possible so that the necessary materials will be complete by the association's deadline.

*New applicants are required to submit the following:*

*-Application form*

*-Official high school transcript showing a cumulative grade point average on a 4.0 scale (must be 3.0 or higher to qualify)*

**Applicants should instruct the school registrar to circle the GPA in red on the transcript.**

**Revised February 2014**