

## **BetaTheta ESA Scholarship**

## **2023 Scholarship Requirements**

Beta Theta ESA promotes and encourages students to further their education. The two-thousand-dollar scholarship is to benefit a worthy student who displays academic skills, leadership quality and participation in school and community. Applicants must have a minimum grade point average of 2.50 (unweighted)

Recipient must be accepted as a full-time student at Lake Sumter State College and enroll by the fall semester from high school.

Scholarship funds will be released to Lake Sumter State College once a letter of acceptance is received by the student to LSSC and the student notifies Beta Theta chairperson Michelle Delaney in writing of his/her intent to enroll in the Fall semester.

Funds for the student will be mailed directly to Lake Sumter State College with the instructions that the funds be used for expenses processed through their office for the recipient. If the scholarship recipient decides to attend another school, he/she must immediately notify the Beta Theta Chairperson so the funds can be returned.

Unused funds in the account will be returned to Beta Theta-ESA if the recipient stops attending classes and/or withdraws from school for whatever reason.



### Beta Theta ESA 2023

## 2023 Scholarship Application Checklist

To be considered for a scholarship you must complete and return this checklist postmarked no later than April 1, 2023. You must also include an official high school transcript, a copy of your SAT or ACT test scores and an essay of no more than 500 words on:

How the participation in school and community activities influenced your life.

Please indicate the documents you are including with your application:

- Scholarship Checklist
- Scholarship Application
- Official High School Transcript
- Copy of S.A.T. or A.C.T. Scores

## **Incomplete applications will not be considered.**

Please submit the completed application, check list, and all supporting documents to your guidance counselor no later than April 1, 2023.

Any question, contact Michelle Delaney, Beta Theta-ESA stkyred@yahoo.com or 407-230-7206



## **Beta Theta ESA**

## 2023 SCHOLARSHIP APPLICATION \$1,000 AWARD

## (A) APPLICANT'S INFORMATION

NAME			
(La	st)	(First)	<del></del>
ADDRESS			
	(Number a	and Street)	<del></del>
(City)	(State)	(Zip Code)	
TELEPHONE		DATE OF BIRTH	
PLACE OF BIRTH_		EMAIL	
If you were not born ar Number.	n American Citizen, but ar	e a Naturalized American Citizen, give date	e place (Office or Court) & Naturalizatio
DATE	PLACE	NUMBER	₹
		(B) FAMILY INFORMATION	
FATHER' NAME_		OCCUPATION	
PLACE OF EMPLOYMENT		ANNUAL INCOME	
MOTHER'S NAME		OCCUPATION	
PLACE OF EMPLO	YMENT		
ANNUAL INCOMI	Ε		

# ATTENDING COLLEGE. \_\_\_\_\_ AGE\_\_\_\_\_IN 1. NAME COLLEGE\_\_\_\_\_ \_\_\_\_\_ AGE\_\_\_\_IN 2, NAME COLLEGE 3. NAME \_\_\_\_\_\_ IN COLLEGE\_\_\_\_\_ 4. NAME\_\_\_\_ \_\_\_\_\_ AGE \_\_\_\_\_IN COLLEGE\_\_\_\_\_ (C) SCHOOL INFORMATION NAME OF HIGH SCHOOL CURRENTLY ATTENDING\_\_\_\_\_ GRADUATION DATE \_\_\_\_\_ SAT SCORES: VERBAL MATH\_\_\_\_\_ ACT SCORE\_\_\_\_\_ LIST SCHOOL CLUBS, OFFICES AND ACTIVITIES YOU ARE INVOLVED IN. (D) PERSONAL AND COMMUNITY INTERESTS AND HOBBIES.

LIST NAMES AND AGES OF BROTHERS AND SISTERS AND INDICATE IF ANY ARE CURRENTLY

LIST COMMUNITY'S ORGANIZATIONS AND ACTIVITIES IN WHICH YOU HAV	
	<del></del>
E) WORK EXPERIENCE	
LIST ANY WORK EXPERIENCE(S) AND INDICATE IF YOU ARE CURRENTLY EMP	LOYED.
(F) COLLEGES AND UNIVERSITIES OF APPLICATION	
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LIST THE COLLEGES AND UNIVERSITIES TO WHICH YOU HAVE APPLIED FOR A BEEN ACCEPTED.  1 2 3. 4 (G) SCHOLARSHIPS AND FINANCIAL AID  LIST ANY OTHER FINANCIAL AID AND/OR SCHOLARSHIPS YOU HAVE ALREAD ARE APPLYING.  1	Y RECEIVED OR FOR WHICH YOU
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(F) COLLEGES AND UNIVERSITIES OF APPLICATION  LIST THE COLLEGES AND UNIVERSITIES TO WHICH YOU HAVE APPLIED FOR A BEEN ACCEPTED.  1	Y RECEIVED OR FOR WHICH YOU

How the participation in school and community activities influenced your life.

#### (I) TERMS OF APPLICATION

BY SIGNING THIS APPLICATION, YOU AGREE, IF ASKED, TO PROVIDE INFORMATION THAT WILL VERIFY THE ACCURACY OF YOU COMPLETED FORM. IF YOU PURPOSELY GIVE FALSE OR MISLEADING INFORMATION, YOU WILL BE DISQUALIFIED FROM THE CONTEST.

BY MY SIGNATURE BELOW, I CERTIFY THAT I INTEND TO ENROLL AS A FULL TIME STUDENT IN AN ACCREDITED JUNIOR COLLEGE, COMMUNITY COLLEGE, COLLEGE OR UNIVERSITY IMMEDIATELY UPON GRADUATING FROM HIGH SCHOOL. I UNDERSTAND THAT ANY UNUSED PORTION OF THIS SCHOLARSHIP WILL BE RETURNED TO THE CLERMONT WOMAN'S CLUB, INC. IF I CEASE ATTENDING CLASSES AND/OR WITHDRAW FROM SCHOOL WITHOUT IMMEDIATELY ENROLLING IN ANOTHER SCHOOL.

(APPLICANT'S SIGNATURE)	(DATE)
(	(=)
(PARENT'S SIGNATURE)	(DATE)
(TIMELTI S STOTATIONE)	(5.112)
(PARENT'S SIGNATURE)	(DATE)
(I ARENI S SIGNATORE)	(DAIL)

APPLICATIONS MUST BE POSTMARKED NO LATER THAN APRIL 1, 2023.

BRING APPLICATION TO THE SCHOOL'S GUIDIANCE COUNCILOR.