## N.C. Public College/University 2018 HBA Family Scholarship Program

sponsored by

Home Builders Association of Raleigh-Wake County Amount of Scholarship: \$1,000

**Criteria.** Our scholarship is geared toward the student who makes a strong contribution to the school/community, but is not necessarily in the top of the class academically.

School/Community Activities	60%
Leadership Capabilities	20%
GPA/Class Rank/SAT	

## The Student must:

- 1. Be the child or grandchild of a current HBA of Raleigh-Wake County member\* (\*Note: Membership must be Active.)
- 2. Be a graduating high school senior.
- 3. Be in need of financial aid.
- 4. Be planning to attend a <u>four-year public</u> college or university in North Carolina <u>full</u> <u>time</u> beginning in the <u>fall semester</u>, <u>2018</u>.
- 5. Have shown leadership capabilities by participating in activities such as:
  - School-sponsored extracurricular activities
  - Volunteer work within Church or Community
  - Part-time employment during school year
  - Received awards or recognitions

In order to qualify for this scholarship, the following must be postmarked by Wednesday, March 14, 2018.

- 1. Completed Application
- 2. Letter from student
- 3. Letter of reference from school
- 4. Transcript with GPA/Class Rank/SAT information
- 5. Copy of Financial Aid Form if available (will be handled confidentially)

Deadline for returning information:

Postmarked by Wednesday, March 14, 2018 to:

HBA Family Scholarship

Home Builders Association of Raleigh-Wake County

5580 Centerview Dr #115

Raleigh, NC 27606



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Home Builders Association of Raleigh-Wake County
Amount of Scholarship: \$1,000

## **Application**

*INSTRUCTIONS:* Complete this application and mail to HBA Family Scholarship, Home Builders Association of Raleigh-Wake County, 5580 Centerview Dr #115, Raleigh, NC 27606, together with required documentation. *Must be postmarked by Wednesday, March 14, 2018.* Questions? Contact Rachel Hamm at 919-232-5882.

Name of HBA Member:	
Relationship to HBA Member:	
Applicant's Full Name:	
Home Address:	
City/State/Zip:	
Phone:	Birth Date:
Applicant High School:	Graduation Date:
CitizenshipUSOther	
College applied to and accepted:	
Latest Grade Point Average (GPA):	
Use an additional sheet of j	paper, if necessary, on the following 4 items.
Activities: (Describe High School and Comm	nunity Activities):
Leadership Capabilities & Awards: (List any o	offices held, honors and/or awards):
Work Experience:	
Intended College Major & Career Goals:	

(See reverse side)

Source of funds for Education (scholarship, grants, trusts, etc.):  Annual Gross Family Income:  Individual  Employment  Amount  Parents or Guardian:  Self/Other:  Number of Dependents in Family:  How many siblings are in college?  If you are awarded this scholarship, how will you finance the balance of your college expenses?  Guidance Counselor or Contact Person at High School:  Name:  Phone:  Applicant's Signature:  Date:  ADDITIONAL INFORMATION. PLEASE ATTACH:  1. A brief letter explaining why you need this scholarship.  2. One letter of reference from a teacher, guidance counselor or administrator from your high school.  3. Transcript with GPA/Class Rank/ SAT information  4. Copy of Financial Aid Form if available (will be handled confidentially)  To be completed by Parent or Guardian  1,  , the parent (	to-know basis for evaluation of the	applicant.		
Parents or Guardian:  Self/Other:  Number of Dependents in Family: Age(s) of brother(s): sister(s):  How many siblings are in college?  If you are awarded this scholarship, how will you finance the balance of your college expenses?  Guidance Counselor or Contact Person at High School:  Name: Phone:  Applicant's Signature: Date:  ADDITIONAL INFORMATION. PLEASE ATTACH:  1. A brief letter explaining why you need this scholarship. 2. One letter of reference from a teacher, guidance counselor or administrator from your high school 3. Transcript with GPA/Class Rank/ SAT information 4. Copy of Financial Aid Form if available (will be handled confidentially)  To be completed by Parent or Guardian  I,, the parent () or guardian () of the above applicant for a scholarship, hereby declare that, to the best of my knowledge and belief, the foregoing statements are complete and correct. I approve the applicant's application for a scholarship.  Signature: Date:	Source of funds for Education (sch	olarship, grants, trusts,	etc.):	
Number of Dependents in Family: Age(s) of brother(s): sister(s):  How many siblings are in college?  If you are awarded this scholarship, how will you finance the balance of your college expenses?  Guidance Counselor or Contact Person at High School:  Name: Phone:  Applicant's Signature: Date:  ADDITIONAL INFORMATION. PLEASE ATTACH:  1. A brief letter explaining why you need this scholarship. 2. One letter of reference from a teacher, guidance counselor or administrator from your high school 3. Transcript with GPA/Class Rank/ SAT information 4. Copy of Financial Aid Form if available (will be handled confidentially)  To be completed by Parent or Guardian  I,, the parent () or guardian () of the above applicant for a scholarship, hereby declare that, to the best of my knowledge and belief, the foregoing statements are complete and correct. I approve the applicant's application for a scholarship.  Signature: Date:				_ ,
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Applicant's Signature:	If you are awarded this scholarship.	, how will you finance th	ne balance of your colleg	ge expenses?
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FINANCIAL INFORMATION: The information supplied will be handled confidentially on a need-

DEADLINE: Must be postmarked by Wednesday, March 14, 2018.