

## **ALTRUSA INTERNATIONAL OF OCALA, INC. 2021 SCHOLARSHIP**

### ELIGIBILITY REQUIREMENTS:

1. Applicant will not be discriminated against on the basis of race, creed, color, age, religion, sex, handicap or national origin.
2. Applicant must be a high school/GED graduate by June of 2021.
3. Applicant's parent or grandparent may not be related to an active member of Altrusa International of Ocala, Inc.
4. The Applicant's principal residence must be in Marion County, Florida. The educational institution may be located outside of Marion County.
5. Other financial assistance will be considered in relationship to applicant's needs. A complete copy of the Applicant's complete FAFSA application should be attached. (FAFSA application may be obtained from [www.fafsa.ed.gov](http://www.fafsa.ed.gov))
6. Applicant must submit two written references from the following: One from a teacher or employer; and one from an individual not related to applicant and not a member of the Altrusa International of Ocala, Florida, Inc.
7. Applicant must submit a transcript of his/her most recent education.
8. Applicant must submit a one-page typewritten letter explaining his/her career goals and why applicant believes he/she will succeed.
9. Applicant must agree to provide Altrusa with additional financial information upon request.
10. Scholarship funds may be restricted to tuition and books. Scholarship funds will be paid directly to the school. However, alternative provisions may be made to assist an applicant in the pursuit of a chosen profession.
11. Applications, transcripts, letters of recommendation, and the statement of career goals must be received by March 31, 2021. A decision by the committee will be made by April 30, 2021, and the decision will be final.

### **APPLICATIONS MUST BE SIGNED AND COMPLETE.**

**Use Blue or Black ink to complete application.**

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

***Applications received after the stated deadline will not be considered.***

**ALTRUSA INTERNATIONAL OF OCALA, FLORIDA, INC.**  
**2021 SCHOLARSHIP APPLICATION**  
**DEADLINE: MARCH 31, 2021**

Altrusa International of Ocala, Inc. is an international service organization comprised of businesses and professional individuals and is dedicated to assisting people in advancing their education and vocational training. This scholarship offers financial assistance to qualified applicants to further their occupational goals. The scholarship is typically awarded for costs such as tuition, books, and fees related to entering or advancing an occupation. The amount of the scholarship varies. After receipt of your written application, letters of recommendation, and transcripts, you may also be contacted for a personal interview.

**USE BLUE OR BLACK INK TO COMPLETE APPLICATION**

**APPLICATIONS SHOULD BE MAILED or DELIVERED TO:**

**ALTRUSA INTERNATIONAL OF OCALA, INC.**

**SCHOLARSHIP COMMITTEE**

**c/o Colleen Duris, Esquire, 500 Northeast 8<sup>th</sup> Avenue, Ocala, FL 34470**

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**NAME:** \_\_\_\_\_ **BIRTH DATE:** \_\_\_\_\_

**ADDRESS: (including city and zip code)** \_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_ **CELL PHONE:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**SOCIAL SECURITY NO.:** \_\_\_\_\_

**EMPLOYER: (If Applicable)** \_\_\_\_\_

**POSITION:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**ADDRESS: (including city and zip code)** \_\_\_\_\_

**SCHOOL NOW ATTENDING:** \_\_\_\_\_

**SCHOOL ATTENDING FALL 2021:** \_\_\_\_\_

**ADDRESS OF SCHOOL: (including city and zip code)** \_\_\_\_\_

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Financial Need: In space provided, please indicate your annual household gross income from last year (2020).

- |                            |                             |
|----------------------------|-----------------------------|
| _____ Under \$15,000       | _____ \$30,000 to \$40,000  |
| _____ \$15,000 to \$20,000 | _____ \$40,000 to \$60,000  |
| _____ \$20,000 to \$25,000 | _____ \$60,000 to \$75,000  |
| _____ \$25,000 to \$30,000 | _____ \$75,000 to \$100,000 |
|                            | _____ Over \$100,000        |

Total number living at home: \_\_\_\_\_ Number of dependent children: \_\_\_\_\_

Special financial considerations which need to be noted:

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- 1) List all other financial assistance you expect to be receiving, including Pell Grants, Gold Seal Awards, Lottery Grants, etc.

Source: \_\_\_\_\_ Amount: \_\_\_\_\_

Source: \_\_\_\_\_ Amount: \_\_\_\_\_  
(if additional space is needed, please use separate piece of paper)

- 2) Have you applied for any other Altrusa Scholarships? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, which scholarship? \_\_\_\_\_

**Please attach the following to this application, or have them sent by the application deadline to the address listed on the previous page.**

1. Sealed transcripts mailed by the school of courses beyond high school/GED taken within the last five years. Provide the total number of credits earned.
2. Two written letters of recommendation from the following: one from a teacher or employer; and one from an individual not related to you and not a member of Altrusa International of Ocala, Inc.
3. A typewritten one-page statement explaining why you have chosen your career goal and why you feel you will be successful in this field.
4. A **complete** copy of your FAFSA application.

**Failure to comply with all of these requirements will in all probability cause you to be ineligible to be considered to receive a scholarship.**

I hereby certify that the information in the application is true and accurate to the best of my knowledge. I agree to use any awarded funds only for the purpose granted by Altrusa International, Inc. of Ocala. I agree to provide Altrusa with additional financial information, if requested; to abide by any conditions, limitations, or considerations attached to my award by Altrusa; and to keep Altrusa informed of my progress in the manner and frequency as the Club requests. I understand that the decision of awarding this scholarship is final and the criteria for awarding it is at the sole discretion of the committee.

**I UNDERSTAND THAT INCOMPLETE AND UNSIGNED APPLICATIONS WILL NOT BE CONSIDERED.**

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

If you have any questions please contact:  
Scholarship Committee (352) 509-6747

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**FOR ALTRUSA USE ONLY**

Amount Awarded: \$ \_\_\_\_\_

Any Conditions to Award: \_\_\_\_\_

Progress Report: \_\_\_\_\_

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