

HORTON HIGH SCHOOL ALUMNI ASSOCIATION

The Scholarship

- ❖ Is an academic scholarship in the amount of \$600 per year per student. Five scholarships may be awarded per year contingent upon availability of funds.
- ❖ Will be awarded directly to the student for academic purposes.
- ❖ These scholarships will be awarded on a one-time basis ONLY from high school to college and can reapply in Graduate School.

SCHOLARSHIP APPLICATION

Application Instructions

Please complete the attached application form and submit it by June 1, 2024. Late applications will not be accepted.

Requirements and Guidelines

Applicants/Recipients must:

- Be a descendent of a Horton High School Alumnus or Attendee of HHS
- Be planning to enroll for the 2024-2025 academic year for a minimum of 12 credit hours/semester
- Have a cumulative grade point average of 2.5 or better (on a scale of 4.0)
- Must have graduated in the last year from a high school
- Or
- Must already be in a college or university
- Or
- Enrolled in Graduate School

Criteria: The criteria for selection of the scholarship recipient may be determined by the selection committee, and may include criteria such as:

- Academic excellence (high school or college transcript)
- Extenuating Circumstances (any unusual circumstances/hardship)
- Extra-curricular Activities/Community involvement, and/or
- Student Leadership
- Be a US Citizen

A minimum of 2 and no more than 3 references are required.

Send Completed Application form to the following address:

Helen L. Dark
Scholarship Chairperson
P. O. Box 1136
Pittsboro, North Carolina 27312

If you are completing the application by hand, please use black ink.

Questions? Please contact _____ at _____

We look forward to receiving your application.

Sincerely,
Horton High School Alumni Association

Personal Information

First Name: _____ Last Name: _____

Address: _____ Home Phone: _____

City: _____ E-Mail: _____

State: _____ Zip: _____ Date of Birth: _____

Citizenship Status: _____

Name/Address of School to attend for 2024-2025 _____

Major/Area of Educational Concentration: _____

Educational Information

High School: _____

GPA: _____

Date of Expected Graduation: _____

Extracurricular Activities

Activity	Roles and Responsibilities
1. _____	_____

2. _____	_____

3. _____	_____

(use additional sheets if needed)

ABOUT YOUR SPONSOR/ATTENDEE

Name(s) _____

Relationship to Applicant _____

Years at HHS _____

Have he/she attended the Reunion of the Classes ___ Yes ___ No

(Note: May be used as one of the criteria in ranking if needed)

CERTIFICATION

I certify that all the information on this form is true and complete to the best of my/our knowledge.

Applicant Signature _____ Date _____

SUBMIT COMPLETE APPLICATION, INCLUDING ALL DOCUMENTATION.
APPLICATIONS WILL NOT BE CONSIDERED UNLESS COMPLETE.
DO NOT SEND MATERIALS SEPARATELY.

Checklist for attachments:

- application complete and signed
- personal statement
- copy of **official** school transcript (sealed)
- original letters of recommendation (2-3 in sealed envelopes)