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, 2025. 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 2025-2026 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 addr	ess:
Helen L. Dark	
Scholarship Chairperson	
P. O. Box 1136	
Pittsboro, North Carolina 27312	
If you are completing the application by hand, please us	e black ink.
Questions? Please contact	_at
XX7 1 1 C 1	

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 2	025-2026
Major/Area of Educational Concentration	on:
Educational Information	
High School:	
GPA:	_
Date of Expected Graduation:	
Extracurricular Activities	
Activity 1	Roles and Responsibilities
2	
3(use additional sheets if needed)	
ABOUT YOUR SPONSOR/ATTEND	DEE
Name(s)	e ClassesYesNo

Essay Question

In the lined space provided (500 words) tell us about experiences that have influenced your decision to pursue a career in your chosen field or discuss a current event (500 words). We would prefer an attached typed copy, but if you do not have a computer, fill free to handwrite on the lines provided.		

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 <u>official</u> school transcript (sealed)
- original letters of recommendation (2-3 in sealed envelopes)