

The Winnie and Frank Harvey Scholarship

Community Presbyterian Church
150 Sherry Drive, Atlantic Beach, FL 32233
Harveyscholarship@outlook.com

NOTE: SCHOLARSHIP INITIATION/INITIAL DISBURSEMENT DUE BEFORE SEPTEMBER 1st

Return this completed form, a course registration form showing that you are registered for at least 6 semester credit hours for the Fall semester, and a complete high school transcript showing that you maintained a 2.5 unweighted cumulative GPA through the end of your senior year to Harvey Scholarship, Community Presbyterian Church, 150 Sherry Drive, Atlantic Beach, FL 32233 by September 1st to initiate your scholarship and have your first year award sent to your school financial services office.

1. Student First, Middle, Last Name: _____

2. Student's mailing address at school for this next term:

3. Student's Email: _____ Phone: _____

4. Parent Name and Email: _____

5. Did you maintain a 2.5 unweighted cumulative GPA through the end of your senior year: Yes ____ NO ____

6. Name of the school you will be attending this year: _____

7. Is the school an accredited two- or four-year college, university, technical, or vocational school within the US:

Yes ____ NO ____

8. Address to which scholarship check should be mailed:

9. What field of study/major are you pursuing: _____

10. What occupation do you intend to pursue: _____

11. Are you enrolled in at least 6 credit hours for this fall semester: Yes ____ No ____

If NO, please explain:

12. Do you intend to enroll in at least 6 credit hours for the Spring semester: Yes ____ No ____

If NO, please explain:

I understand that funds from this scholarship may be used by the school to cover tuition, fees, books, supplies, and equipment that are required for the courses at the eligible institution. I certify that all information contained in this application is true, complete, and accurate.

Signature

Date

