The purpose of the Scholarship Plan is to encourage and assist worthy young men and women to prepare themselves through college training for positions of community leadership and service.

A maximum of ten scholarships may be awarded each year under the Hatton Lovejoy Scholarship Plan. Not more than six awards may be made to any one sex.

The maximum amount of a scholarship award shall be $2,250.00 per semester of college attendance for 8 semesters, or a total maximum value per scholarship award of $18,000.00.

Students receiving scholarship awards may attend any college or university of their choice approved by the Hatton Lovejoy Scholarship Plan Committee. They will be expected to pursue a full course of study each quarter or semester during the period of the award.

The amount of any scholarship award shall not exceed the actual expenses of tuition, room, board, books and lab fees of the student as approved by the Hatton Lovejoy Scholarship Plan Committee. A recipient of a Lovejoy Scholarship award will not be permitted, without specific approval of the Hatton Lovejoy Scholarship Plan Committee, to accept any other scholarship funds or loans except from parents or legal guardian. Such approval is routinely given, unless the total scholarships received would exceed the actual allowed school expenses.

Additional scholarship awards to substitute for vacancies in scholarships previously awarded may be made in the discretion of the Hatton Lovejoy Scholarship Plan Committee.

Applicants for scholarship awards shall have been residents of Troup County, Georgia, for at least two years. Applicants for scholarship awards must be graduates of (or scheduled for graduation within six months) an accredited high school with a scholastic standing in the upper 25% of their class. Applicants for scholarship awards, while in college, must maintain a cumulative scholastic standing in the upper one-half of their college class.

A scholarship award may be withdrawn if the original eligibility status of the student changes during the period of the award, except that the award may be continued through the school year during which such change in status occurs. A scholarship award will be withdrawn if a cumulative scholastic standing in the upper one-half of the student’s class is not
maintained, except that the award may be continued through the freshman year. A scholarship award will be withdrawn if the personal conduct of the student, in the opinion of the Scholarship Committee, becomes unsatisfactory.

**APPLICATION**

All applications must be returned to the Hatton Lovejoy Scholarship Plan Committee not later than the closing date shown on the application form. The official transcript of an applicant’s high school record and other information requested on the application form must accompany the application.

Letters of reference are not desired as the Committee will make its own investigation.

**SELECTION OF SCHOLARSHIP AWARD STUDENTS**

Responsibility for the selection of the applicants to receive scholarship awards will be vested in the Hatton Lovejoy Scholarship Plan Committee. The Committee will give consideration to the following factors when selecting a student for a scholarship award:

- College Board and intelligence test
- Scholastic record
- Financial needs
- Planned course of study
- Character
- Qualities of leadership
- Participation in student and community activities
- Cooperation with school authorities
- Personal interview by Scholarship Plan Committee or by designated representatives
- Other information obtained through investigation by the Committee
- Purpose in life

**ADMINISTRATION**

The Hatton Lovejoy Scholarship Plan is sponsored by Fuller E. Callaway Foundation. The Plan is administered by the Hatton Lovejoy Scholarship Plan Committee appointed by the Board of Trustees of Fuller E. Callaway Foundation.

The decision of the Scholarship Plan Committee will be final in the administration of the Scholarship Plan.

Students receiving scholarship awards will be required to make periodic reports to the Scholarship Plan Committee. The Committee also requires that a transcript of the student’s grades be received from the college after each quarter or semester. Until quarterly or semester reports and transcripts are received, no further payment will be made.

The right is reserved by Fuller E. Callaway Foundation to modify or discontinue this Hatton Lovejoy Scholarship Plan at any time except that scholarships previously awarded will be fulfilled.

*Applications and correspondence should be addressed to:*

Fuller E. Callaway Foundation  P.O. Box 790
Hatton Lovejoy Scholarship Plan Committee  LaGrange, Georgia 30241
Hatton Lovejoy Scholarship Plan
Sponsored By Fuller E. Callaway Foundation

APPLICATION

Read Carefully Before Filling Out Application

1. Study the requirements in Hatton Lovejoy Scholarship Plan pamphlet.

2. Do not submit an application unless you are reasonably sure that your high school scholastic record places you in the top 25% of your class.

3. Read the application blank before attempting to fill it out.

4. Answer all questions. Do not answer with a check mark. If the answer is “none,” please write “none.”

5. Give special care and thought to answering question 17.

6. Do not submit letters of reference as the Scholarship Committee will make its own investigation.

7. Attach a recent individual portrait/passport photograph and high school transcript.

8. Attach additional pages to answer any questions for which sufficient space has not been provided.

9. Incomplete applications will not be considered.

10. Late applications will not be considered.

FORWARD THIS APPLICATION TO:
(together with photograph and transcripts)
Fuller E. Callaway Foundation
Hatton Lovejoy Scholarship Committee
P.O. Box 790
LaGrange, Georgia 30241

CLOSING DATE
For submitting Application
February 15, 2016

NAME _____________________________________________

ADDRESS ___________________________________________

CITY __________________________ STATE _______ ZIP ____________
1. Full Name ________________________________ Telephone __________________

2. Email Address _________________________________________________________

3. Current Home Address __________________________________________________
   City State County Zip

4. Have you been a resident of Troup County for at least two years? __________________________

5. Date of Birth __________________________ Place of Birth __________________________
   Month Day Year

6. Father’s name in full _______________________________________________________
   Address _______________________________________________________________
   Where is Father employed? _______________________________________________

   Mother’s name in full ___________________________________________________
   Address _______________________________________________________________
   Where is Mother employed? _____________________________________________

7. List schools attended and attach transcripts as applicable.

<table>
<thead>
<tr>
<th>Name of School</th>
<th>Location</th>
<th>From</th>
<th>To</th>
</tr>
</thead>
<tbody>
<tr>
<td>Junior High School</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High School</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8. List extra-curricular activities, honors received, and offices held in:

   School ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

   Church ______________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

   Community ____________________________________________________________
   ________________________________________________________________
9. Name of college or university you desire to attend

10. Address of Financial Aid Office of college or university you desire to attend

11. Itemize the cost of attending this school on a quarter (or semester) basis, according to the school's policy.

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition or matriculation fees</td>
<td>$</td>
</tr>
<tr>
<td>Room</td>
<td>$</td>
</tr>
<tr>
<td>Meals</td>
<td>$</td>
</tr>
<tr>
<td>Textbooks</td>
<td>$</td>
</tr>
<tr>
<td>Laboratory or other special fees</td>
<td>$</td>
</tr>
<tr>
<td>Others (Specify)</td>
<td>$</td>
</tr>
<tr>
<td><strong>Total Cost</strong></td>
<td>$</td>
</tr>
</tbody>
</table>

12. From what source do you propose to pay expenses over and above a scholarship award?

13. What course of study do you propose to take? For what occupation or profession are you preparing?

14. Have you had any previous experience in this field? Yes ____ No ____ If yes, explain

15. Have you been offered a scholarship of any other nature? Yes ____ No ____ If yes, explain

16. Supply additional information that might be helpful to the Hatton Lovejoy Scholarship Plan Committee.
   (Please type your answer on a separate sheet of paper.)

17. Explain your desire to go to college, your need for a scholarship, and your plans beyond college.
   (Please type your answer on a separate sheet of paper.)

Date __/__/____ Signature ________________________________