

# HATTON LOVEJOY SCHOLARSHIP PLAN

Sponsored By Fuller E. Callaway Foundation

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## APPLICATION

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Read Carefully Before Filling Out Application

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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.
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CLOSING DATE

For submitting Application

February 15, 2018

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FORWARD THIS APPLICATION TO:  
(together with photograph and transcripts)

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

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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.

	<b>Name of School</b>	<b>Location</b>	<b>From</b>	<b>To</b>
Junior High School				
High School				
Other				

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.
- Tuition or matriculation fees \$ \_\_\_\_\_
- Room \$ \_\_\_\_\_
- Meals \$ \_\_\_\_\_
- Textbooks \$ \_\_\_\_\_
- Laboratory or other special fees \$ \_\_\_\_\_
- Others (Specify) \$ \_\_\_\_\_
- Total Cost \$ \_\_\_\_\_
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 \_\_\_\_\_