

George F. Sorn Scholarship Fund Information

Eligibility Requirements

To qualify for consideration, the applicant must document:

- 1. <u>Parents are farm workers in Florida specialty crop agriculture</u>: Evidence of employer or employers in the past 12 months. The term 'specialty crop' means fruits and vegetables, tree nuts, dried fruits, nursery crops, floriculture and horticulture.
- 2. <u>Exemplary Citizenship</u>: Demonstrated by (2) letters of recommendation from non-relatives in the community, school, or other educational agencies.
- 3. <u>Acceptance to a Post-Secondary Institution</u>: Demonstrated by an attached copy of the letter of acceptance (Technical School, Community College, or University), or a current college/university transcript if the student is already attending an institute of higher education. Applications are open to undergraduates only.
- 4. <u>Will Graduate from a Florida High School or Currently Enrolled in College:</u> Records required.
- 5. <u>Extracurricular Activities, Awards, Volunteer and Paid Work Experience:</u> Complete attached Student Activities Form
- 6. <u>Personal Goals</u>: Include an essay of at least 250 words (maximum of 500 words) written by the applicant, which must include the following:
 - History of Family
 - Educational Accomplishments
 - Future Plans and Goals
 - Personal Examples of the Applicant's Community Service and/or Work Experience

All applications must be postmarked by April 21 to:

Florida Specialty Crop Foundation ATTN: Scholarship P. O. Box 948153 Maitland, FL 32794 Or you can **fax** to: 321-214-0210

The committee established for the purpose of selecting recipients of a gift will review the application materials and select the applicant they feel has a need and best reflects the spirit of this gift. A gift of from **\$1,000 to \$3,000** will be given out to each applicant selected. Depending on the number of qualified applicants, up to two scholarships will be awarded. Award winners may renew their awards <u>annually for up to (3) additional years</u> if they continue post-secondary studies and maintain a grade point average of at least 2.50. Gift funds are designed to assist with educational related needs incurred by students enrolling in or attending post-secondary institutions. Before funds are made available, the applicant must provide a copy of his/her registration form from the post secondary institution (college, technical school, university, etc.) they are attending. *The student must make a written request for scholarship renewal each year by June 1 and include evidence of obtaining the minimum 2.50 cumulative grade point average.*

George F. Sorn Scholarship Application Form

Student's Last Name	First Name			
() Home Phone	() Cell Phone			
Student's Mailing Address	City	State	Zip Code	
Student's E-Mail Address (if ava	ailable)			
Date of Birth	Place of Birth			
Mother Or Guardian's Name		Current Occupation		
Father Or Guardian's Name	Current Occupation			
Describe The Type of Agricultural Work That Your Family Has Done				
Name and address of school cu	rrently attending			
() Phone number of school curren	tly attending			

Name And Location of Post-Secondary School You Will Attend or Are Currently Attending

STUDENT ACTIVITIES FORM

Name	Student ID#	
Name of High School		
GPA: Weighted Test Scores: SAT Unweighted	ACT	
Recognitions, Awards, Honors:		
	Year	
Extracurricular Activities:	Year_	
	Year_	
Community Service, Job Experience, etc.		
	Year_	

List All Financial Assistance That Applicant Has Received

• Include all Scholarships, Grants, and Loans That Have Been Awarded

Name of Award		Amount
		_ \$
		_ \$
		_ \$
		_ \$
		_ \$
		_ \$
	TOTAL	\$

What Are Your Estimated Financial Needs?

• Check with the school you plan to attend for their estimated cost of attendance

Tuition and Fees:	\$
Books and Supplies:	\$
Computer:	\$
Housing and Meals:	\$
Transportation (car/gas):	\$
Other ():	\$
TOTAL	\$

The information on this form and contained in this application package is true and correct to the best of my knowledge as evidenced by the following signature:

Applicant's Signature	Date			
Application Packet Must Be Postmarked by Florida Specialty Crop Found Attn: Scholarship P. O. Box 948153 Maitland, FL 32794 Or, fax to: 321-214-0210				
Application Checklist:				
Personal Essay Proof of acceptance to school chosen				
Letters of Recommendation	This competed application form			
High School Records (Transcript Summary)				