## NUCA of Florida/ANDREW SCOTT JOHNSON MEMORIAL SCHOLARSHIP FOUNDATION SCHOLARSHIP APPLICATION

**Undergraduate or Graduate College Student**

Name of Applicant (Please Print):

First Middle Last

Street Address:

City, State, Zip:

Home Telephone: ( ) Date of Birth:

NUCA of Florida Member Firm:

Mother’s Full Name: Marital Status:

Employer: Position:

Father’s Full Name: Marital Status:

Employer: Position:

* Completed General Information

## APPLICATION CHECK LIST

* Completed Academic Information
* Completed Extra Curricular Information
* Essay attached (500 words or less)
* Current College Transcript (Signed by Student Advisor)
* Letter of Recommendation from a Faculty Member

Applicant’s Signature: Date:

I approve of the submission of this application.

Signature of Guidance Counselor or Faculty Member:

## GENERAL INFORMATION

Name and Address of High School:

Year of Graduation:

Name and Address of College (currently attending):

Intended school year for scholarship use (Check one):

* Freshman  Junior
* Sophomore  Senior
* Graduate School

College for which this scholarship is to be used:

Have you been accepted? Yes No

|  |  |  |
| --- | --- | --- |
| Estimated yearly educational cost: | Tuition: | $ |
|  | Books: | $ |
|  | Room/Board: | $ |
|  | Total: | $ |
| Financial assistance received: | Financial Aid: | $ |
|  | Grants: | $ |
|  | Other Scholarships | $ |
|  | Total: | $ |

Intended course of study:

Intended career plans:

Declared Major :

Optional:

Financial responsible parent annual family income:

## ACADEMIC INFORMATION

Current college G.P.A.:

Academic Honors received (awards, prizes or distinctions). Please include applicable year records:

## EXTRACURRICULAR INFORMATION

**School activities/clubs (list separately with years involved and office held, if any):**

1.

2.

3.

4.

5.

6.

Special recognition received:

## SCHOOL SPONSORED ATHLETIC PROGRAMS

**(List separately with years involved)**

1.

2.

3.

Special recognition received:

## COMMUNITY SERVICE GROUPS/CIVIC GROUPS

**(List separately with years involved)**

Special recognition received:

Hobbies and outside activities:

## WORK EXPERIENCE

|  |  |  |  |
| --- | --- | --- | --- |
|  | | Length of | (CHECK ONE) |
| Employer | Position | Service | Full-Time/Part-Time/Summer |

Extraordinary responsibility you have at home (If applicable):

## ESSAY

**(500 words or less--provide as an attachment)**

**SUBJECT:** For the past several years, Florida has offered the Florida Virtual School for students who wish to take online courses. However, in light of the COVID-19 pandemic, students were forced to pivot to virtual learning and social-distancing from their peers, teachers and classmates. Describe what you believe the impact of social-distancing and virtual classrooms has on education, whether positive or negative impacts.

**AUTHORIZATION**

Should you be selected to receive one of the *NUCA of Florida/Andrew Scott Johnson Memorial Scholarship Foundation* scholarships, we would like your permission to include portions of your application and essay in various association communications and publications. Your signature below will indicate your approval.

Signature of Applicant

Please return your completed application along with pertinent information postmarked **no later than May 5, 2021.**

NUCA of Florida/Andrew Scott Johnson Memorial Scholarship Foundation Attention: Foundation Trustees

215 South Monroe Street, Suite 500

# Tallahassee, Florida 32301