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

**High School Graduate or Student Entering First Year of College**

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 High School Transcript (Signed by Guidance Counselor)
* Letter of Recommendation from a member of the High School Faculty containing your class rank and size of your graduating class

Applicant’s Signature: Date:

I approve of the submission of this application.

Signature of Parent or Guardian:

Signature of Guidance Counselor or Faculty Member:

## GENERAL INFORMATION

Name and Address of High School:

Year of Graduation:

Name and Address of College (If currently attending):

Intended school year for scholarship use (Check one):

* Freshman  Junior
* Sophomore  Senior

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**

High school class rank: \_ High school class size:

A.C.T. score:

S.A.T. (Verbal):

S.A.T. (Math):

List separately S.A.T. II or Advanced Placement tests taken, with scores and subject matter (if applicable):

High school G.P.A.: Current college G.P.A. (If applicable): 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,*** *to:*

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

215 South Monroe Street, Suite 500

Tallahassee, Florida 32301