

ARKANSAS CIRCUIT CLERK'S ASSOCIATION

Scholarship Application Information

Requirement for those seeking Scholarship:

1. Must be eligible (see below)
2. Applicant should show a financial need
3. Applicant **must** attend an accredited college or educational institution
4. Applicant **must** have 2.5 GPA or higher

Instructions for completing Application:

1. Application is to be completed by applicant
2. All parts of the application must be **completed in full**
3. Please type or print in black or blue ink
4. Attach transcript
5. Include verification of income
6. Include a short essay or personal statement pertaining to the applicants needs and goals

Mail completed Application with attachments to:

Jeanie Smith
C/O Calhoun County Circuit Clerk
P.O. Box 1175
Hampton, AR 71744

Applications **must be** received by **May 31** to be considered for a scholarship in the current year.

Eligibility Requirements:

1. Active Member or retired
2. Sibling, Child, Grandchild, Stepchild, Adopted Child of Active Member
3. Any Deputy of Active Member; and
4. Sibling, Child, Grandchild, Stepchild, Adopted Child or Spouse of a Deputy of an Active Member

**ARKANSAS CIRCUIT CLERKS' ASSOCIATION
APPLICATION FOR SCHOLARSHIP**

1. Applicant's Name _____
Permanent Address _____
City, State, Zip _____
Age__ Single_ Married_ Divorced__ Number of Dependents____
Circuit Clerk_____County_____

Eligibility: Eligible recipients for scholarship awards are as follows:

- 1) Active Member or retired;
- 2) Sibling, Child, Grandchild, Stepchild, Adopted Child, or Spouse of an Active Member;
- 3) Any Deputy of an Active Member; and
- 4) Sibling, Child, Grandchild, Stepchild, Adopted Child or Spouse of a Deputy of an Active Member

Indicate your status to Clerk or Deputy Clerk: Active member__ Deputy of Active member __, Sibling __, Child __, Grandchild __, Stepchild __, Adopted child __, Spouse __

Are you currently employed? Yes__ No__ Position _____

Place of employment _____ Salary/Wages _____

2. **Source and amount of funds available for year in which scholarship is requested:**

Parents Projected income: projected income \$ _____ Savings \$ _____

Your projected income: projected income \$ _____ Savings \$ _____

Spouse Income \$ _____ Other income \$ _____

Scholarships \$ _____ Government grants \$ _____

3. **Educational Institution applicant is attending:**

Institution Name _____

Address _____

City, State, Zip _____

Major _____

**ARKANSAS CIRCUIT CLERKS' ASSOCIATION
APPLICATION FOR SCHOLARSHIP
continued**

Academic Classification at time of application (check one)

High School Senior College Freshman College Sophomore
 College Junior College Senior Graduate Student
 Other (Please specify) _____

4. Educational Institution in which enrollment is desired:

Institution Name _____

Address _____

City, State, Zip _____

Course of Study _____ Degree Sought _____

Expected date of completion _____

Amount of Tuition/Fees per semester \$ _____ Date payment due _____

5. Community Involvement and Extracurricular Activities:

_____	_____
_____	_____
_____	_____
_____	_____

Applicant Signature _____

Date _____

Clerk's Signature _____

Date _____

Qualifications and Requirements:

1. Must have 2.5 GPA or better
2. Must attend an accredited college or educational institution
3. Attach transcript-high school, college or educational institution
4. Attach verification of income
5. Attach a short essay on applicants needs and goals
6. Applicant to complete application in full, typed or printed in blue or black ink

Six (6) Scholarships in the amount of \$1,000.00 will be awarded in June. They will be forwarded to the educational institution you have specified.

Return completed application by May 31 to:

Arkansas Circuit Clerks' Association
C/O Jeanie Smith
P O Box 1175
Hampton, AR 71744