



Rose & Womble Internal Scholarship Application Sponsored by The Rose & Womble Foundation

I. PERSONAL INFORMATION

Last Name: _____ First Name: _____ Middle Name: _____

Social Security #: _____ Phone #: () -

Address: Street _____ City/State: _____ Zip: _____

Date of Birth: / / _____ Email address: _____

Are you a U.S. citizen? (circle one): YES NO

Name of Rose & Womble Relative: _____ Relationship: _____

Parent/Guardian Information:

Father/Guardian:

Last Name: _____ First Name: _____ Middle Name: _____

Address: Street _____ City/State: _____ Zip: _____

Employer: _____ Occupation: _____

Mother/Guardian:

Last Name: _____ First Name: _____ Middle Name: _____

Address: Street _____ City/State: _____ Zip: _____

Employer: _____ Occupation: _____

List the names of all family members living in your home (excluding yourself & aforementioned parents/guardians):

Name	Age	Relationship	Employment/School
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II. ACADEMICS & ACTIVITIES:

High School(s) Attended:

Name:	City/State:	Dates attended (mo/yr)
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Name:	City/State:	Dates attended (mo/yr)
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Awards and honors you have received:

Special schools or programs in which you have participated:

School/Class Offices Held:

Community service in which you participate or have participated:

III. REFERENCES [Provide only 3]

Last Name:	First Name:	Phone #:
Address: Street	City/State:	Zip:
Title or Position:		

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Address: Street	City/State:	Zip:
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IV. CERTIFICATION

Parent/Guardian:

To the best of my knowledge, the information stated in this application is complete and correct.

I understand that (student's name)_____ is applying for financial aid to help with the educational expenses of continuing education and I approve of this application. Should he/she win, I also grant permission to Rose & Womble to publish photos of my child.

Parent/Guardian's signature

Date

Student:

To the best of my knowledge, the information stated in this application is complete and correct.

Student's signature

Date

***** When submitting your entry, be sure to enclose the following:**

- Application
- Essay
- Transcripts
- UP TO 3 letters of recommendation

Send applications via interoffice mail to Chris Kreutter,
Rose & Womble Foundation Scholarship Chair or mail them to:
Rose & Womble Internal Scholarship
C/O Chris Kreutter.
5857 Harbour View Blvd. Suite 100
Suffolk, Virginia 23435

*** Applications must be postmarked by April 15th ***