



Fred J. Smiley Scholarship

Presented by:

African American Administrators' Council of Marion County



Applicant's Name: _____ Last First M.I. DOB _____

Parent/Guardian: _____

Mailing Address: _____ City: _____ Zip: _____

Phone: _____ Fax: _____ E-mail: _____

High School: _____ Weighted GPA: _____

School Address: _____ City: _____ Zip: _____

School Phone: _____ School Fax: _____

College: _____ Major: _____

Please provide a brief summary--Community Services Project(s):

(If more space is needed, please use additional pages).

Number of years of Community Service: _____

Clubs/ Organizations: _____

Applicant's Signature Date

Parent/Guardian Signature Date

Fred Smiley Scholarship Fund Criteria:

1. Must be an African American Male High School Senior and reside in Marion County
2. Application must be typed and turned in by **4pm on April 5, 2019**
3. Submit a sealed transcript- 2.5 GPA or higher
4. Submit three reference letters (2 must be from school personnel)
5. Type a 500 word essay on the following topic **"If you were to look back on your high school years, what advice would you give to someone beginning their high school career"?**
6. The application must be signed by your guardian.
7. Submit forms to Cassandra Boston -Grants & Federal Programs Office at 306 NW 7th Ave, Ocala FL 34475

Identify your participation of any service projects within your school, community, or church on the following pages. If you need more space, please attach a typed summary to the application packet.

Community Service Project:

Reference Page:

Applicant's Name: _____
School: _____ Graduation Date: _____

Name: _____
Position: _____
Business: _____
Address: _____
Phone Number: _____ Fax: _____
E-mail: _____

Name: _____
Position: _____
Business: _____
Address: _____
Phone Number: _____ Fax: _____
E-mail: _____

Name: _____
Position: _____
Business: _____
Address: _____
Phone Number: _____ Fax: _____
E-mail: _____