



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 3, 2020**
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

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: _____