EMC 2022 Walter Harrison Scholarship

Application Rules:

| Applica | tion ixuics. |
|---------------------------|----------------------------------|
| Students applying for the | is scholarship must live in a |
| house that receives | s electric service from |
| | EMC. |
| | |
| If your power provi | ider is a different EMC |
| |), |
| you must submit your | application directly to that |
| EMC. Georgia Power o | r MEAG customers are not |
| eli | gible. |
| | |
| EMC | s applications must be |
| postmarked by | , 2022 and mailed to: |
| | |
| | $\underline{\hspace{1cm}}$ EMC |
| | |
| | |

Georgia EMC Walter Harrison 2022 Scholarship Application

Please note: Applications must be turned in directly to your local EMC to be considered.

Each participating EMC may have a different application deadline so be sure to check with them regarding due date.

| Name | | |
|--------------------------------|---|---|
| Address | | |
| E-Mail | | |
| Phone No. (include area | ı code) | Last 4 digits of SSN |
| Applicant's electric co | operative | |
| | | quired of adult, non-dependant applicants. ouse's information must be included below. |
| Home Address (street/ | city/state/zip code) | |
| Home Phone No. (inclu | ude area code) | |
| Parents' or Spouse's N | ame(s) | |
| Father's or Adult Appl | icant's place of employment | |
| Phone Number (include | e area code) | |
| Mother's or Spouse's p | place of employment | |
| Phone Number (include | e area code) | |
| Please attach the follo | owing: | |
| | | confirm admission to a Georgia college or technical school. |
| involveme residence in | nt in the community. Do not | th reference to future plans and goals as well as your reveal your name, the name of your cooperative or your place of ses will be marked out before being submitted to the judges, which document. |
| C. High scho than 10 year | - | ge/technical school transcript (unless student graduated more |
| | C.T score. If you did not tal TE: Test score requirement | te the S.A.T. or A.C.T., you may submit an ACCUPLACER waived for 2022. |
| E. Two letter | s of recommendation. | |
| I certify that a knowledge. | all information reported on | this application is true and correct to the best of my |
| Appli | cant's Signature | |

| Academic Performance and Potential: | | | | |
|---|------------|--|--|--|
| High school or college grade average (4.0 point scale) | | | | |
| | | | | |
| S.A.T., A.C.T. or ACCUPLACER score Participation in outropyrical activities: attach additional list if necessary | | | | |
| Participation in extracurricular activities: <i>attach additional list if necessary</i> Membership in organizations | | | | |
| | | | | |
| | | | | |
| Offices held in organizations | | | | |
| Hanara and recognitions received | | | | |
| Honors and recognitions received | | | | |
| | | | | |
| Other activities | | | | |
| | | | | |
| College or technical school which you plan to attend or currently attend: | | | | |
| School name | | | | |
| Contact person | | | | |
| Mailing address | | | | |
| Phone number including area code | | | | |
| Date you will begin attending OR | | | | |
| Status in college/technical school: ☐ Freshman ☐ Sophomore ☐ Junior ☐ Se | nior/Other | | | |
| School tuition per quarter/semester \$ | | | | |
| Financial Need Assessment: Will be handled as strictly confidential information Total adjusted gross income for household (from most recent income tax return) \$ | | | | |
| Other household income \$ | | | | |
| Number of family members residing in household | | | | |
| Other factors which influence financial need | | | | |
| | | | | |

Proof of financial information submitted may be required if scholarship is awarded.

WALTER HARRISON SCHOLARSHIP FUND CRITERIA

- 1. The recipient's primary residence must be the household of an EMC member or EMC employee. EMC members and employees are also eligible.
- 2. The recipient must be enrolled in an accredited program, either full-time or part-time.
- 3. The recipient must be an undergraduate student only.
- 4. The scholarship fund will be in the form of a grant program with funds being paid to the college, university or technical school.
- 5. A person may submit an application each year, but previous winners are not eligible for a second scholarship.
- 6. The scholarship fund will provide \$1,000 for each scholarship winner's educational expenses. The number of scholarships will depend on the fund earnings.
- 7. Scholarship use must commence within one year of date of issuance and be totally utilized within two years of the date of issuance. The school shall return any unused funds to the scholarship fund.
- 8. The scholarship may be used at any two-year or four-year accredited college or university in Georgia including technical schools.
- 9. A combination of need and academic ability will be used in determining scholarship fund winners.
- 10. Each EMC may submit one application for each one-time \$1,000 that they have contributed to the fund to the executive committee for consideration in choosing the scholarship fund winners.
- 11. An executive committee will oversee the scholarship fund. This committee will consist of the Chairman of the Board of GEMC, the Vice-Chairman of the Board of GEMC, the Chairman of the Services Committee, the Manager of Planters EMC, the Manager of Excelsior EMC, and the Chief Executive Officer of GEMC (ex officio member).
- 12. Georgia Southern University will administer the scholarship fund.
- 13. Scholarship winners must notify their EMC Walter Harrison Scholarship Coordinator of their acceptance of the award and the name of the school they plan to attend by June 1st or they will forfeit the scholarship.