

## **Hearts and Hands Scholarship Application Information**

- **Application must be filled out completely. Incomplete applications will be returned. An application must be submitted each year.**
- **Complete transcript (grade report is not acceptable) and reference must be attached (required for re-applicants also.) Reference must be from a current academic source – advisor, teacher, counselor, etc. Applications without these attachments will be returned.**
- **To receive initial scholarship, admission to an accredited school is required. For subsequent scholarships, a minimum of a “C” average must be maintained. Scholarships will not be granted for more than four years.**
- **Applicant must have a Townsend residential address (37882 zip). If a PO Box is used for mailing purposes, a street address must also be provided.**
- **Deadline is June 1<sup>st</sup> – no applications will be considered after that date. Applications must be received by 5 PM and can be mailed to Hearts & Hands Scholarship Fund, c/o Ann Hughes, 403 Red Wolf Lane, Townsend, TN 37882, or dropped off at the Mary E. Tippitt Memorial Library.**
- **Applicants will be notified of scholarship awards around the first of July.**
- **All funds are sent directly to the student’s account at the school.**

**These scholarships are made possible by the generous contributions of the Townsend community and a great deal of fund-raising effort by volunteers. Scholarship recipients or their families are expected to help out with our fund-raising activities. Our three main events are the bake sales at the Spring and Fall Festivals and our fall white elephant sale.**

**Any questions, please call:  
Ann Hughes 448-8732  
Susan Pasquini 448-1942**

# HEARTS AND HANDS SCHOLARSHIP FUND APPLICATION

## Directions:

1. Answer every question in this application. **Incomplete applications will be returned.**
2. Attach a copy of your school transcript for the immediate past year or semester.
3. Attach one educational professional reference (example: **current** Counselor, Teacher, or Principal)
4. Submit no later than 5 PM, June 1, in the year of the application. Mail to Ann Hughes @ 403 Red Wolf Lane, Townsend, TN 37882 or hand deliver to the Mary E. Tippitt Memorial Library.

## PART A (GENERAL)

Name of Applicant: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ S.S.# \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (if applicable)(\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Names of Parents: \_\_\_\_\_ Parents' e-mail \_\_\_\_\_

## PART B (EDUCATIONAL INFORMATION AND GOALS)

1. Who accredits the school you plan to attend? (Note: Must be regionally accredited before a scholarship can be granted.) \_\_\_\_\_
2. What is your major (area of study)? \_\_\_\_\_
3. What are the educational requirements of the program in years/semester/time? \_\_\_\_\_
4. What are your educational/professional/vocational goals/plans for the future? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Name of school you will be attending: \_\_\_\_\_
6. Address of the school plan on attending: \_\_\_\_\_
7. Name of your guidance counselor or academic advisor: \_\_\_\_\_
8. Phone of counselor or advisor as listed above: (\_\_\_\_\_) \_\_\_\_\_

**PART C (REFERENCE FORM)**

The scholarship applicant is required to have one professional educational reference. This completed professional educational reference **must be attached** to the application for the Hearts and Hands Scholarship. Please do not ask your reference to send it in separately.

Applicant Name \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

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TO THE EVALUATOR: The person named above has applied to be considered for the Hearts and Hands Scholarship and has asked you to evaluate his/her ability.

How long have you known this individual? \_\_\_\_\_ years/months (circle)

In what capacity have you now/worked with this individual?

\_\_\_\_\_

Have you found this student to be able to apply him or herself to his or her educational pursuits? (Please explain.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why do you believe this student is deserving of a Hearts and Hands Scholarship?

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Name: \_\_\_\_\_

Position \_\_\_\_\_ Date: \_\_\_\_\_

Institution: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_