



## **BEECH SCHOLARSHIP FUND**

# **SCHOLARSHIP APPLICATION**

### **APPLICATION FOR COLLEGE APPLICANTS ONLY**

**(Do not submit this page with scholarship application)**

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#### **HOW TO APPLY**

**Please review checklist before submitting your application. Do not submit two-sided printed application, essay, or other documents.** Application and recommendation letters must be signed with original signature.

To apply, qualified applicants must submit all required documents (*scholarship application, typewritten essay, signed recommendation letters, etc.*) by U.S. mail or hand delivered on or before **April 17, 2023** no later than **3:00 PM**. Applications delivered by mail must be postmarked by **April 17, 2023** to the below address:

Ms. Christine Brown  
Beech Community Services  
C/O Beech Scholarship Fund  
1510 Cecil B. Moore Avenue, Suite 100  
Philadelphia, PA 19121

**Incomplete applications and applications not received by the date due will not be accepted.**

# BEECH SCHOLARSHIP COLLEGE APPLICATION FORM

Please read carefully and answer each question completely. Your application **will not** be accepted if all questions are not answered in full. Mark N/A for items not applicable. **Your application should be handwritten legibly in blue ink or typewritten. Do Not Submit two-sided printed application or documents.**

## PERSONAL DATA

Program of Study: \_\_\_\_\_ University: \_\_\_\_\_ Sex: \_\_\_\_ Age: \_\_\_\_ Race: \_\_\_\_

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_ Date of Birth \_\_\_\_-\_\_\_\_-\_\_\_\_

### Emergency Contacts Information: (Must be completed)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip Code \_\_\_\_\_

## Additional Information

Name of graduating High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Name of current University: \_\_\_\_\_ GPA (1.0 - 4.0): \_\_\_\_ National Honor Society: yes \_\_\_ no \_\_\_

Please list any other types of assistance (i.e. Vocational Rehabilitation, Veteran's Education Benefits, Workforce Investment Act, other scholarships, etc., that you have applied for or been awarded: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list the types of Community Service you have performed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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List awards or academic recognitions: \_\_\_\_\_

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Indicate school activities including leadership positions: \_\_\_\_\_

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Please feel free to give additional information that you may feel the Scholarship Committee may need to know to determine your eligibility for a scholarship. \_\_\_\_\_

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**I certify that all the information submitted in support of my application is complete and accurate to the best of my knowledge. I understand that any false information will make me ineligible to receive a scholarship from the Beech Scholarship Fund. By signing below, I authorize that my name, photo, and essay can be released to donors or used for publication by the Beech Companies.**

**Applicant and school official must sign below where indicated.**

Student's Signature: \_\_\_\_\_

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

I certify that the information I provided is complete and accurate to the best of my knowledge.

Administrator/  
Professor's Signature: \_\_\_\_\_

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

I certify that the information provided by the applicant is accurate to the best of my knowledge and, this student is in good standing with the school.