



## **BEECH SCHOLARSHIP FUND**

# **SCHOLARSHIP APPLICATION**

**APPLICATION FOR  
HIGH SCHOOL 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 HIGH SCHOOL APPLICATION FORM

## ESSAY CRITERIA

Essay must be typed (**no two-sided documents**), double-spaced using a font size of 12 (Times New Roman); submitted with all necessary documents; should be no less than 1000-words, and based on (1) one of the following questions:

- 1. Why are you a good candidate to receive this scholarship and what are your future goals?**
- 2. How does your future goals relate to your field of study and why?**

Please read carefully and answer each question completely. Your application will not be processed 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 and printed on single side of paper.**

## PERSONAL DATA

Program of Study: \_\_\_\_\_ School Attending: \_\_\_\_\_

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

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

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

Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Race: \_\_\_\_\_ Date of Birth \_\_\_\_-\_\_\_\_-\_\_\_\_ Email: \_\_\_\_\_

### Parents/Guardians Contact Information:

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

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

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

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

## Additional Information

Name of High School: \_\_\_\_\_ Address: \_\_\_\_\_

Graduation Date: \_\_\_\_\_ National Honor Society: yes \_\_\_\_\_ no \_\_\_\_\_ Numerical Class Rank: \_\_\_\_\_

Percentile Class Rank: \_\_\_\_\_ GPA (1.0 – 4.0): \_\_\_\_\_ ACT Score: \_\_\_\_\_ SAT Scores (verbal): \_\_\_\_\_ Math: \_\_\_\_\_

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: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List awards or academic recognition: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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: \_\_\_\_\_  
If you are under 18, your parent or guardian must also sign the application.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
I certify that the information provided by the applicant is complete and accurate to the best of my knowledge.

Principal or Guidance Counselor’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
I certify that the information provided by the applicant is accurate to the best of my knowledge. This student is in good standing with the school.