To apply for the Birdies for Scholarships, please:

(1) Complete the BCF Scholarship Application Form; and
(2) Provide any scholarship-specific addendums to the application form; and
(3) Include a copy of your student aid report or a copy of your FAFSA application; and
(4) Submit current transcript

Where applicable, “service to school” is defined as involvement in school activities, such as clubs, service organizations, school government, pep squad, etc.

**Deadline for submission is Friday, March 13, 2020, by 5 pm.**

Applications should be mailed or dropped off to:
Bartlesville Community Foundation, Scholarships
208 E 4th Street
Bartlesville, OK 74003

Applications **must** be completed by the student.

Applicants selected for scholarships will be required to show proof of admission at an accredited college or university prior to grants being paid.

Award recipients will either be recognized at the high school awards assembly or be notified directly by Bartlesville Community Foundation.

Applicants with questions may contact Bartlesville Community Foundation at (918) 337-2287.
Birdies for Scholarships

Award:
Up to $2000 payable as 50 percent per semester for the first two semesters as long as 2.5 or higher grade point average is maintained.

Eligibility Criteria:
- Must be associated with the Bartlesville High School golf team
- Bartlesville High School Graduating senior.
- 3.0 or higher GPA on the four-point scale
- Service to school will be defined as involvement in school activities, such as clubs, service organizations, school government, pep squad, etc.
- Attending university, college, junior college, trade or vocational school

Required Addendum:
- 500 words or less essay outlining why the applicant is the best candidate for the award.
SCHOLARSHIP APPLICATION FORM
2020

Please clearly complete the applications below in typed or handwritten in pen. Any application that is not legible will not be considered. If additional space is necessary to answer required questions, please add additional typed pages and clearly state which question is being answered.

SCHOLARSHIP NAME: _______________ Birdies for Scholarships _______________

STUDENT NAME: ____________________________________________________________

ADDRESS: ____________________________________________________________________________________
Street/mailing address
City
State
Zip

HOME PHONE: _________________________________ CELL PHONE: _______________________________

DATE OF BIRTH: ___________________________ EMAIL: _________________________________

ETHNICITY (if applicable to scholarship criteria): ___ White ___ African American ___Asian ___ Hispanic ___ Native American ___ Pacific Islander/Hawaiian

GENDER (if applicable to scholarship criteria): ___ Male ___ Female

NAME OF HIGH SCHOOL: __________________________________________________________ GPA: ___________________

PLEASE LIST AWARDS, HONORS, SCHOOL CLUBS (including office served, if applicable), & EXTRACURRICULAR ACTIVITIES:
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
PLEASE PROVIDE YOUR EMPLOYMENT HISTORY:

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

WHAT ARE YOUR COLLEGE PLANS?  ______________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

ARE YOU RELATED TO BARTLESVILLE COMMUNITY FOUNDATION EMPLOYEES, BOARD OR COMMITTEE MEMBER?  ___Yes  ____No

If yes, what is the relationship? ________________________________________________________________

______________________________  _________________________
Signature of student applicant    Date

By signing, you acknowledge that all information is true and correct, to the best of your knowledge, and that you, the student, completed the application and any required addendum/essay. The applicant should understand that the intent of collecting and maintaining this data on individuals is for determining eligibility of the applicant, specifically, term grades and transcripts by Bartlesville Community Foundation and the scholarship committee.