

THE SOCIETY OF MAYFLOWER DESCENDANTS IN THE STATE OF FLORIDA
SCHOLARSHIP APPLICATION

Last Name _____ First Name _____ Middle _____

Telephone _____

Address _____

Birth Date _____ E-Mail Address _____

MAYFLOWER ANCESTOR(S) _____

Are you a Junior Mayflower Member _____ Colony _____

SPONSORING RELATIVE _____

COLONY _____ GEN# _____ FL# _____

RELATIONSHIP TO YOU _____

Educational Plans and Objectives _____

School you plan to attend _____ Location _____

Career Goal _____

GPA (4.0 System) _____ Class Rank _____ Out of _____

Requirements: Unweighted GPA of 3.0 or better.

Attach your 400-600 word essay on "How has being a Mayflower Descendant influenced the way you act and think about your abilities, education, talents and future goals?"

Attach a copy of your school transcript.

Two letters of recommendation: One from a school official and the other from a non-relative

List on one side of an 8 1/2x11 paper, extracurricula activities, honors received and any pertinent information that will demonstrate community involvement. Maximum of 2 pages.

Include a photograph of yourself.

Send postmarked by April 1st to: State Scholarship Chair Laura S. Brock, 430 Bay St. NE # 705,
St. Petersburg, FL 33701-3040

Applicants

Signature _____ Date _____