



VICTORY

SCHOLARSHIP FOUNDATION

Please complete application. Once completed email application to the email address listed below. Any questions please give us a call.

 **WEB:**

WWW.WCGL1360.COM

 **E-MAIL:**

DEBAM1360@GMAIL.COM

 **PHONE:**

(904)766-9955



"Empowering Dreams, Achieving Victory."

**Victory Scholarship Foundation, Inc.
26 – 4801227**

Information listed below answers questions asked in regards to the Victory Scholarship Foundation, Inc.:

Who specifically will be eligible to receive the scholarship?

Any high school senior with a 2.5 GPA that resides in the AM 1360 FM 94.7 WCGL Gospel Radio Station coverage areas (*Duval, Nassau, Clay, Baker, Columbia, St. Johns, Flagler, Alachua, Putnam, Bradford, Camden, or Glynn*) and a candidate for graduation in 2025.

Will the scholarship be given on the basis of academic merit and eligibility criteria? Yes.

How will the scholarship be publicized?

The scholarship will be publicized in local newspapers in our radio station coverage areas, Church Bulletins, Comcast Cable, AM 1360 FM 94.7 WCGL Gospel Radio Station's Focus on the Community Program and Public Service Announcements, and will be placed on the station's website.

What criteria must any potential recipient meet?

Student must submit an application, official school transcript, copy of ACT/SAT score sheet (if available), a brief essay (250 words or less), "Why I should be considered to be a recipient of this scholarship," be a high school senior or candidate for graduation, have at least a 2.5 GPA, cannot be a relative of any employee of AM 1360 WCGL/ FM 94.7 Radio Station or the Board of Directors of the Victory Foundation, Inc. and must live in a household within the coverage area of AM1360 WCGL/FM 94.7 Radio, (*Duval, Nassau, Clay, Baker, Columbia, St. Johns, Flagler, Alachua, Putnam, Bradford, Camden, or Glynn*).

Is there an application process?

Yes. Applications will be provided on AM 1360 FM 94.7 WCGL Gospel Radio Station's website, to be downloaded or can be picked up in person at the office and studios located at 3890 Dunn Avenue, Suite 804, Jacksonville, FL 32218. Applications must be submitted no later than March 1st of the academic school year.

A COPY IS ATTACHED

How many scholarships are going to be given and how will you determine the amount of aid given?

Up to five scholarships will be given per year, with no more than \$1000.00 per scholarship, based on funds available.

Are scholarships renewable?

No.

Describe your procedures for supervising the scholarship.

The funds will be issued directly to the school of the recipient's choice to be applied towards tuition, books or housing.

If made aware that the terms of the scholarship are violated, the scholarship will be revoke and re-issue to another qualified recipient.

Our selection committee will consist of one educator and an attorney (names still pending acceptance), along with the current Board of Directors.

No relatives of the selection committee, directors, or substantial contributors are eligible to receive a scholarship.

**VICTORY SCHOLARSHIP FOUNDATION, INC.
3890 DUNN AVENUE, SUITE 804
JACKSONVILLE, FL 32218**

1. DEADLINE for Scholarship Foundation applications is March 1st. (no exceptions)
2. Refer to criteria for eligibility requirements.
3. Refer to page four (4) of this application for a list of the supporting documents needed. (i.e., reference forms, evidence of GPA, etc.). Incomplete applications will be returned to applicants.
4. If any question does not apply to you in this application, please put N/A in the space.
5. Type or print legibly. Illegible applications will be returned to applicants.
6. You will be notified by email/US mail May 1st regarding the status of your application.
7. If you have any questions about the application, please call (904) 766 9955.

Eligibility Criteria:

Student must submit an application, official school transcript, copy of ACT/SAT score sheet (if available), a brief essay of (250 words or less) "Why I should be considered to be a recipient of this scholarship," be a high school senior or candidate for graduation, have at least a 2.5 GPA, cannot be a relative of any employee of AM 1360 WCGL/ FM 94.7 Radio or the Board of Directors of the Victory Foundation, Inc. and live in a household within the coverage area of AM1360 WCGL/FM 94.7 Radio, (*Duval, Nassau, Clay, Baker, Columbia, St. Johns, Flagler, Alachua, Putnam, Bradford, Camden, or Glynn*).

Your signature below indicates that you have read and understand the above eligibility criteria.

Applicant's Signature: _____

Application

Please type or print your answers. If the application is illegible, it will be returned to you.					
1.	Last Name: _____	First Name: _____			
2.	Mailing Address: Street: _____ City: _____ State: _____ ZIP: _____				
3.	Telephone Number: () _____ Email Address: _____				
4.	Date of Birth: Month _____ Day _____ Year _____				
5.	Social Security Number: _____				
6.	In the Fall of _____, I will be attending college as a: (Circle one) Freshman Sophomore Junior Senior Master's Level				
7.	I will be attending the following school in the <u>Fall of</u> _____ : _____ Proof of acceptance or current student enrollment from the above school is required .				
8.	Grade Point Average (GPA): _____ (On a 4.0 scale) Attach proof of GPA. Your most recent official school transcript required.				
9.	ACT Score: _____ Or _____ (If Available) SAT Score: _____				
10.	Name & address of parent(s) or legal guardian(s): Use reverse side of application if you need more space. Name (s) _____ Street: _____ City: _____ State: _____ ZIP: _____ Phone of parents or legal guardians: _____				
11.	Name and address of high school attended: _____				
12.	List the name of any college you have attended.	Year Began	Year Ended	Year Graduated (If applicable)	Type of Degree Received (If applicable)
	A.				
	B.				
	C.				

13.	What specialty/major do you plan to major in as you continue your education?
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14.	List expenses you expect to incur per Semester/quarter:	
A.	Tuition:	Amount: \$
B.	Books:	Amount: \$
C.	Room & Board:	Amount: \$
D.	Other expenses:	Amount: \$ Describe below under comments
E.	Other expenses:	Amount: \$ “

Comments:		

15.	List other financial assistance you will receive per semester/quarter:	
A.	Personal:	Amount: \$
B.	Other Scholarship(s):	Amount: \$ Describe below under comments
C.	Grants:	Amount: \$ “
C.	Student Loan(s):	Amount: \$ “
D.	Other Financial Resources:	Amount: \$ “

Comments:		

Use an additional sheet if you need more room to list financial information requested in items 14 & 15.

16.	What are your educational and professional goals and objectives?
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17.	List your academic honors, awards and membership activities while in high school:
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18.	List your community service activities, hobbies, outside interests, and extracurricular activities:
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19.	<p>A. The following items must be attached to this application in order for the application to qualify to be reviewed by the scholarship committee.</p> <p>B. Your application will be returned to you if these items are not attached to this application. (No exceptions.)</p> <p>C. Circle "YES" or "NO" to be sure you have attached each item as required.</p>		
	YES	NO	Two reference forms. Return these completed forms in a sealed envelope from your teachers or professors.
	YES	NO	Proof of college acceptance or current student enrollment.
	YES	NO	Most recent <u>official</u> high school or <u>official</u> college transcript. Photocopies of your transcript are not acceptable .
	YES	NO	Proof of ACT or SAT scores. [If available]

STATEMENT OF ACCURACY

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that my picture may be taken and used for any purpose deemed necessary to promote the Foundation's scholarship program.

Signature of scholarship applicant: _____ Date: _____

REMEMBER

The deadline for this application to be received by the Foundation is **March 1, 5:00 p.m.** **No exceptions!**