SR. MARY BERNADETTE LITTLE SCHOLARSHIP APPLICATION FORM

SPONSORED BY: THE CONVENT OF MERCY ACADEMY "ALPHA" ASSOCIATION INC - FLORIDA CHAPTER

FLORIDA CONTACT:JAVIER DALEY - CHAIRPERSON-SCHOLARSHIP COMMITTEEEMAIL:russ0509@gmail.com905-510-4055

JAMAICA CONTACT: NICOLE PALMER-HUNTER - LOCAL LIAISON

EMAIL: nicolepalmer.hunter@gmail.com

PHONE: 876-928-1342

APPLICANT INFORMATION

Last Name



Address				
Phone	E	-mail Address		
Field of Study Pursuing				
EDUCATIONAL INFORMATION (ACADEMIC ACHIEVEMENTS/AWARDS)				
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ESSAY	
In less than 1,000 words, please state why you should be awarded this Scholarship. You may include experiences that influenced you, your achievements, the career path you will choose and what influenced your decision, etc.)	
SIGNATURE	
I certify that my answers on this Application are true and correct to the best of my knowledge and I understand that false or misleading information on my Application may result in my disqualification.	
By signing this application, I understand that if I am awarded this Scholarship, I will be REQUIRED to commit to the following conditions:	
 take and complete fifteen (15) College Credit Hours for EACH Semester of the Academic Year at the Tertiary Institution earn/maintain a cumulative Grade Point Average of 3.0 (B) or above for the Academic Year 	
and I am aware that Remedial Courses are not included.	
Signature Date	