
2019 Bobbie Anderson Scholarship; Chapter BO, P.E.O.

***Two \$2,950 scholarships will be awarded
To be used for tuition or books or room and board***

Criteria

• *Dependent on attending an accredited **College/University in Colorado ONLY***

- *Female*
- *Current high school senior*
- *At least a B average*
- *Full time student*
- *Pikes Peak area resident*
- *Two recommendations from teachers or counselors*
- *Certification that all information is true and complete*

NO APPLICATION WILL BE CONSIDERED UNLESS ALL THE ITEMS ON THE CHECK-LIST ARE E-MAILED. IF YOU DO NOT HAVE ADOBE ACROBAT ON YOUR COMPUTER, PLEASE DOWNLOAD THE SOFTWARE TO SAVE THE APPLICATION.

**DUE DATE:
FEBRUARY 18, 2019**

Please type application (PDF writable. See attachment below) and save all required attachments in PDF. Send via email to:

Eula Tatman @ etatman@ppcf.org

719-445-0602

Put B.P.O. 2018 Bobbie Anderson Scholarship in the subject line

ADDITIONAL QUESTIONS:

Micha Rhude

719-244-6790

micharhude@yahoo.com

STUDENT NAME: _____

**Bobbie Anderson Scholarship; Chapter BO, P.E.O.
Application**

Full Name _____
Last Name First Name Middle Name

I prefer to be called (nickname or shortened first name) _____

Current School _____

Home Address _____

ZIP _____

Phone Number _____ **Cell** _____

Email _____

Date of Birth _____ **Last four number of SS#** _____

I have been a resident of the Pikes Peak area since _____

Father's Name _____

Address _____

Employer _____

Mother's Name _____

Address _____

Employer _____

If anyone other than a parent is responsible for you please give the following information about that person:

Name _____

Relationship to you _____

Address _____

Phone Number _____

If you have brothers or sisters, list their names, ages and colleges (if any) they attend

STUDENT NAME: _____

Extra-curricular Activities

List school or community activities, clubs or organizations in which you have participated beginning with 9th grade. Please include offices held and duties or responsibilities in each. If this space is inadequate, you can submit more information by including a separate document.

School Activities/Clubs

Grade

Community Activities (including Volunteer)

Grade

Sports

Type

Grade

STUDENT NAME: _____

Awards/Honors

Category

Grade

Work Experience Type , dates, how many hours, employer

STUDENT NAME: _____

Educational Data

Please list schools attended beginning with 9th grade.

School Name	Dates Attended	Location
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List colleges to which you are applying.

List colleges to which you have been accepted.

STUDENT NAME: _____

**Please type a one-page statement that discusses your plans and goals.
Include comments on an experience of personal significance or specific
person and how that/they inspired or encouraged you.**

STUDENT NAME: _____

APPLICATION AND ALL OTHER REQUIRED ITEMS ON THE CHECKLIST BELOW MUST BE E-MAILED in PDF TO:

**Eula Tatman @ etatman@ppcf.org
719-445-0602**

**Put B.P.O. 2018 Bobbie Anderson Scholarship in the subject line.
Please do not send photos of documents.**

Submission Checklist

- Completed Application**
- School Transcripts**
- ACT or SAT scores if available**
- Two (2) recommendations from either teachers or counselors**
- Certification that all information is true and complete (next page)**

NO APPLICATION WILL BE CONSIDERED UNTIL ALL ITEMS HAVE BEEN RECEIVED. PLEASE HAVE YOUR TRANSCRIPT AND RECOMMENDATIONS SCANNED AND UPLOADED in PDF AND E-MAILED WITH YOUR APPLICATION.

NOTE: You may have an interview with Chapter BO, P.E.O. Scholarship Committee after submitting this application.

STUDENT NAME: _____

Application Signatures (Required)

- I certify that all the information in this application is true and complete to the best of my knowledge.
- I understand that if I am selected for an award, I may be asked to provide proof of the information stated in this application. I understand that if this information is not provided, or if the information is different than presented in this application, that the award may be rescinded. The Pikes Peak Community Foundation and Bobbie Anderson Scholarship, Chapter BO, P.E.O committee reserve the right to revise, amend, alter or change the amount of the award and the selection criteria as required to meet the spirit and intent of the basic award.

Date

Student Signature

Date

Signature of Parent or Guardian (if student is under 18 years of age)