



P.E.O. Virginia Cottey College Scholarship Fund Application 2018-2019

This application applies to the 2018-2019 academic year (fall 2018 and spring 2019). Virginia Cottey College Scholarships are available to women who are U.S. Citizens or legal permanent residents, domiciled in Virginia, and have been accepted as a student at Cottey College.

Freshman and Transfer Virginia Cottey College Scholarship Applications must be postmarked **within 30 days** following the acceptance and decision to attend Cottey College.

Renewal Virginia Cottey College Scholarship Applications must be postmarked by **February 15, 2018**. Recipients are eligible for three renewals provided they are in good academic standing.

All Applicants please fill out pages two and three of this application.

Renewal students will additionally be required to complete page four. You will need the Registrar and the Vice President for Student Life to complete sections. It is advised that you make arrangements for completing their portions well in advance of the deadline.

When your application is complete, please mail it to:

V.C.C.S.F Scholarship Committee
P.O. Box 3715
Hampton, VA 23663

Questions may be emailed to: vssf-vccsf@vapeo.org

**Virginia Cottey College Scholarship Fund
Scholarship Application 2018-2019**

Please **type** the following information:

Check One: Initial V.C.C.S.F. Application Renewal V.C.C.S.F. Application

Name: (Ms. Mrs.) _____
 Last First Middle

Date of Birth: (MM/DD/YYYY) _____

Current Address: _____

Home Address: _____
(if different) _____

Current Phone: (____) _____ cell other **Home Phone:** (____) _____

Current Email Address: _____
Please note, scholarship notifications will be sent to this address.

Home Email Address: (if different) _____

High School: _____

High School Address: _____

High School Phone Number: _____

**Virginia Cottey College Scholarship Fund
Scholarship Application 2018-2019**

What will be your academic standing in September 2018?

Freshman Sophomore Junior Senior

What is your planned field of study? _____

If you are a member of the P.E.O. Sisterhood, please give your chapter: _____

If a relative is a P.E.O. member, please give her name, relationship to you, chapter, and state.

If you learned about this scholarship through a P.E.O. member, please give her name, chapter, and state.

If not through a P.E.O. member, how did you learn about this scholarship?

If you are a Designated Scholar applying for a renewal scholarship, please give your Designated Chapter.

Date

Signature of Applicant

If the applicant is under eighteen, please provide:

Father's/Guardian's Name: _____

Address: _____

Mother's/Guardian's Name: _____

Address: _____

Date

Signature of Parent/Guardian

