

Restoring the Breach, Inc. 515 Denmark St Suite 2500, Statesboro, GA 30458

Brittainee Collins Scholarship Application

Dear Applicant:

Restoring the Breach, Inc. is committed to helping young people succeed academically. This includes ensuring that students have access to the financial resources they need to obtain a college education. The organization offers two scholarship awards through the Restoring the Breach, Inc. Scholarship Program.

Scholarships are available to high school seniors attending a public, private, or charter high school as well as a sophomore or junior pursuing their associates or bachelors degree within the service area of Bulloch county. To be eligible to receive an award, recipients must have a grade point average of at least 2.5 (based on a 4.0 scale) and enroll or be enrolled in a full-time program at an accredited 4-year college or university during the 2023-2024 academic year. Verification of enrollment must be provided.

Applications must include the following items:

- A completed, typed application postmarked by April 1, 2023.
- An official, signed transcript (sealed envelope)
- Two (2) letters of recommendation
- An essay highlighting your community service, leadership activities, and college and career goals
- A signature from a parent or guardian (if a high school senior)



*** Attach this form to the front of your completed scholarship application. ***

	APPLICANT COVER SHEET								
Nam	e		Date						
Addr	ress								
City		Zip Code	Phone						
High	School/College/University		Overall GPA						
	Scholarship Eligibility Requirements								
To m	To meet the guidelines to receive this scholarship, you <u>must</u> :								
	 Currently a senior attending a public, private, or charter high school within the service areas of Bulloch County enrolling in a full-time program at an accredited 4-year college or university during the 2023-2024 academic year. 								
-	<u>or</u>								
	Be a student enrolled in a full-time program at an accredited 4-year college or university during the 2023-2024 academic year.								
	Have a minimum grade point aver	rage of 2.5 (based on a 4.	.0 scale)						
	Applicants must provide verificat	ion of enrollment.							
	Note: All grade point averages are based on a 4.0 weighted scale.								

Submit Completed Application to:

Attention: Brittainee Collins Scholarship Committee Restoring the Breach, Inc. 515 Denmark St, Suite 2500, Statesboro, GA 30458

Access to the official application can be downloaded online by emailing info@restoringthebreach.com.

Scholarship Application Checklist

Use this checklist to make sure that you have submitted all the required materials to receive consideration for the scholarship. Incomplete applications will **not** be considered.

You	r application <u>must</u> include the following doc	uments:									
	A completed, typed application (pages 4 – 8)										
	A parent/guardian's signature (pages 5 and 8; if a High School Senior)										
	Your signature at the end of the application (page 8)										
	Media Release and Photography Form (page 8)										
	An <u>official, signed</u> high school transcript (sealed envelope)										
	Two (2) letters of recommendation from any of the following persons (no more than one per category):										
	High School Teacher	Minister									
	High School Counselor	Organizational Sponsor									
	 High School Principal 	 Volunteer Coordinator 									
	Community Leader	● Employer									
	Recommendations from family members in the categories above will not be accepted. It is suggested that you ask the people who are writing your recommendations to comment upon (1) the length of time they have known you; (2) your personal qualities, character, leadership abilities, and/or any special attributes; and (3) why they believe you have the perseverance to succeed at the college/university level. All letters must be on letterhead to be accepted.										
	A one - page essay highlighting current events and one from the two essay questions: What do you cand why? or Where do you see yourself 10 years font, double-spaced, one-inch margins)	consider to be the single most societal problem									

Directions: Provide all information requested below.



I. Applicant Info	rmation								
First Name Middle Name			Last Name				Gender		
Street Address						L			
City	State	7	Zip						
Home Phone	E-mail Address								
Date of Birth (Month/Day/	Year)		Place of Birth (City and State)						
High School									
High School Attending (Atte	ended)			Grade			Overall GPA		
Address		City			State		Zip		
Intended Major/Field of St	Intended Minor	Intended Minor/Field of Study							
College									
School Attending	Year			Overall GPA					
Address	Address City			State			Zip		
Major/Field of Study	Minor/Field of Study								
II. Parent/Guard	dian Informa	ation							
Name of Mother/Guardian									
Mother/Guardian's Address (if different from applicant's)			City		State			Zip	
Mother's Work Phone	Mother's Home/Cell Phone								
Mother's Occupation	Mother's Employer								
Name of Father/Guardian									
Father/Guardian's Address (if different from applicant's)			City State			tate		Zip	
Father's Work Phone	Father's Home/Cell Phone								
Father's Occupation	Father's Employer								

III. Honors and Awards (e.g., academic, athletic, community, and/or school awards)									
Award	Sou	ource of Award							Reason(s) for Award
1.									
2.									
3.									
4.									
5.									
IV. Extra-Curricular/Co	omm	unity	y Se	rvice	Act	ivitie	eS (e.g.	, schoo	ol, religious, social groups)
		Grade/\							
Name of Group/Activity	9	10	11	12	1st yr.	2nd yr.	3rd yr.	Le	eadership Position(s) Held
1.						yı.			
2.									
3.									
4.									
5.									
6.									
7.									
V. Colleges and Universities									
Name of School to Which You Appl	ied	City/State							Status of Application
1.									
2.									
3.									
4.									
5.									
6									

VI. Financial Awards and Scholar	ships							
Scholarship, Loan, Grant, or Award Applied For	Awarding Organization	Amount Expected	Amount Awarded					
1.								
2.								
3.								
4.								
5.								
Total Amount Expected (Not Received)								
Total Amount Awarded (Received)								
VII. Work/Volunteer Experience								
Employer/Organization	Dates of Employment/Service	Positio	n Held					
1.								
2.								
3.								
4.								
5.								
6.								



X. Other

Indicate any additional information you feel the Scholarship Committee should consider in evaluating your need and eligibility for this scholarship. Must be typed.



Signature of Applicant's Parent or Guardian

Restoring the Breach, Inc. **2023 Brittainee Collins Scholarship Application**

Date

I hereby certify that all the information provided in this application is accurate and current. I understand this application packet will be kept confidential, and all materials submitted become the final property of the Restoring the Breach, Inc.

Signature of Applicant	Date
Media Release and Photography Form	
I understand that in order to apply for the Restoring the Breach, Inc. scholarships that I map photographed and therefore, a release must be completed in order to complete this applied	•