Walter F. Burnett, Jr. Memorial Scholarship Application

Thank you for your interest in the Walter F. Burnett, Jr. Memorial Scholarship!

A complete application packet includes the following:

* Completed Application (below)
* Essay
* Transcripts
* Two Letters of Recommendation

Please be advised that incomplete application packets, or applications submitted after the deadline will not be considered.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of School/College Currently Attending: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College you will be attending Fall Semester: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current G.P.A.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ESSAY: On a separate sheet of paper, in 500 words or more, write an essay stating your educational goals, how you plan to accomplish these goals, and why you chose this particular field of study. Also describe how you have exemplified the qualities of perseverance in the face of hardship, a positive attitude, and faithfulness to God and family.

TRANSCRIPTS: Please submit a copy of your report card or official transcript.

TWO LETTERS OF RECOMMENDATION: Please submit two (2) letters of recommendation with your application. Letters can be from an employer, a teacher or professor from high school or college, a Sunday school teacher or Ministry leader, not related to you.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I attest that everything in the application and related documents is true and correct.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Signature

Please submit your scanned application package to [WFBMScholarship@gmail.com](mailto:Scholarship@gmail.com) or contact us for our mailing address.

Picture & Information Release:

I hereby grant permission to the Walter F. Burnet Scholarship, and its officers, trustees, employees, agents, students, representatives, successors, licensees and assigns (hereinafter "WFBMS") to photograph my image, likeness, or depiction and/or that of my minor children (if applicable). I hereby grant permission to the WFBMS to edit, crop, or retouch such photographs, and waive any right to inspect the final photographs. I hereby consent to and permit photographs of me and/or those of my minor children to be used by the WFBMS worldwide for any purpose, including educational and advertisement purposes, and in any medium, including print and electronic. I understand that the WFBMS may use such photographs with or without associating names thereto. I further waive any claim for compensation of any kind for the University's use or publication of photographs of me and/or those of my minor children (if applicable).

I hereby fully and forever discharge and release the WFBMS from any claim for damages of any kind (including, but not limited to, invasion of privacy; defamation; false light or misappropriation of name, likeness or image) arising out of the use or publication of photographs of me and/or those of my minor children (if applicable) by the WFBMS, and covenant and agree not to sue or otherwise initiate legal proceedings against the WFBMS for such use or publication on my own behalf or on behalf of my minor children. All grants of permission and consent, and all covenants, agreements and understandings contained herein are irrevocable.

I, hereby authorize WFBMS to use any and all information such as my name, award amount, and information contained in my application and essay for WFBMS purposes such as the awards ceremony, and advertisement in both print and electronically. WFBMS will not provide your address or phone number to any party without your prior consent.

I agree to release from liability WFBMS, its directors, officers, employees and agents, and all persons from, and hold it harmless against, any and all claims of whatever nature that I might have now or in the future as a result of the WFBMS providing such information.

I acknowledge and represent that I am over the age of 18, have read this entire document, that I understand its terms and provisions, and that I have signed it knowingly and voluntarily on behalf of myself and/or my minor children (if applicable).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of applicant (or Legal Guardian if applicant is under 18 years)