

2025 SHARON POTTS MEMORIAL SCHOLARSHIP at Northside High School

Scholarship Program Guidelines

Available Scholarship: Two (2) \$4,000.00 scholarships are available for seniors attending Northside High School in Warner Robbins, Georgia

Program Guidelines & Priorities:

- * Seeking graduating seniors with a record of volunteerism in the community, in non-school sponsored activities and participation in extracurricular school activities.

- * Applicants must have a **minimum GPA of 3.0**, exhibit financial need, and plan to attend a 2-year or 4-year college.

- * Scholarship funds will be paid **in August or September 2025 for the first semester of the student's first year of college**. It will be the student's responsibility to submit to Northside High School's Bookkeeper's office an invoice for first semester tuition and fees, student ID number and college information for verification of enrollment.

- * Applicants must have the endorsement of their Guidance Counselor on their applications attesting they are qualified applicants for the scholarship program. Application deadline for submission to Northside High School Guidance Department is **March 28, 2025 at 3pm**. Late applications will not be accepted.

- * **Official transcripts** will be added by the guidance department to any application packets submitted.
- * **Checklist**
 - o Application
 - o Essay:
 - **Please type and attach an essay (250-500 words) describing how you recovered from a mistake, challenge, or disappointment in your life? Also, describe how you believe recovering from the mistake, challenge or disappointment will help you succeed in college and beyond.**
 - o Guidance Counselor Signature
 - o School Transcript (added by Guidance department)

The applications will be reviewed, and recipients selected by the Scholarship Committee. The scholarship winners will be announced at Senior Awards Night in May 2025.

Please submit any questions to Alexandria.Varlack@hcbe.net.

**2025 SHARON POTTS MEMORIAL SCHOLARSHIP
at Northside High School**

Please Complete in BLUE/BLACK ink or TYPE your answers.

Last Name: _____ **First Name:** _____

Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone Number: _____ **Email Address:** _____

Date of Birth: _____ / _____ / _____ **Gender:** Male _____ Female: _____

Cumulative GPA: _____ Transcript will be attached by the Guidance Department.

Are you the first person in your family to go to college: YES: _____ No: _____

Total Family Income (Check One)

- | | | |
|---|---|--|
| <input type="radio"/> Less than \$20,000 | <input type="radio"/> \$20,000 - \$30,000 | <input type="radio"/> \$30,000-\$40,000 |
| <input type="radio"/> \$40,000-\$50,000 | <input type="radio"/> \$50,000-\$60,000 | <input type="radio"/> \$60,000-\$70,000 |
| <input type="radio"/> \$70,000 - \$80,000 | <input type="radio"/> \$80,000-\$90,000 | <input type="radio"/> \$90,000-\$100,000 |
| <input type="radio"/> Above \$100,000 | | |

Extenuating Circumstances (if any):

List any academic and/or non-academic honors/awards you earned while in high school. (Organized by year.)

List any hobbies, clubs, outside interests or extracurricular activities you participated in while in high school.

List any volunteer work you participated in (school-related and non-school-related)

List any leadership positions you held, organized by year.

If you have decided on what college you will attend, please list the school's name: _____

If not, list your top 3 college choices:

Parent or legal guardian Information

Name: _____

Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Home phone: _____ **Work phone:** _____

STATEMENT OF ACCURACY FOR STUDENTS

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship winner my picture may be taken and used to promote the Abry Jones Educational Scholarship Program at Northside High School. (Winner may waive photo due to unusual or compelling circumstances.)

I hereby understand that if chosen as a scholarship winner, according to the Northside High School Scholarship Program, I must be present at Senior Awards Night for Northside High School in May of 2025 to receive my scholarship award.

I hereby understand that if chosen as a scholarship winner, according to the **Sharon Potts Memorial Scholarship** at Northside High School, it is my responsibility to remit to the Northside High School the appropriate information, which includes an acceptance letter as well as proof of registration, for my scholarship funds to be awarded to me for my first semester of college.

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

Signature of scholarship applicant: _____ **Date:** _____

STATEMENT OF SUPPORT BY GUIDANCE COUNSELOR

I hereby affirm that this application meets the criteria set forth by this scholarship program and that I submit this application to the Northside High School Scholarship program.

Signature of Guidance Counselor: _____ **Date:** _____

SUBMIT COMPLETE APPLICATION PACKAGE BY 3pm March 28, 2025 TO:Ms. Varlack
Northside High School Guidance Department

Late Application Packets will NOT be accepted!