

# Florida Frontiersmen, Inc.

## College Scholarship

### **Eligibility:**

1. Be a graduating Senior or Student.
2. Grade point average of 2.5 or higher.
3. Accepted in an accredited two- or four-year College, University, Business or Vocation School.
4. Performed community service.

### **Applications:**

1. Complete application form.
2. High school transcript.
3. Letter of recommendation from a teacher, guidance counselor or principal on school letterhead.
4. Written 300-word essay about yourself and your goals.
5. Written 200-word essay about a pre-1840 historical event that had an impact on you or our Country.
6. Interviews with the Board of Directors to take place on a Saturday in April. We will notify the student of the date and time of the interview. Interview will be held at the Florida Frontiersmen, Inc. property in Homeland.
7. Applications must be postmarked by Friday, April 4, 2025.
8. A scholarship in the amount of \$1000.00 will be awarded to each student chosen by the Board of Directors.
9. You must be present at our regular meeting on Saturday, May 3, 2025 to receive this scholarship.

***All applications are required to place requested information***

***in a 9" by 12" envelope and mail to:***

***Florida Frontiersmen, Inc.***

***Michele Noto***

***2680 N. Priester Road***

***Avon Park, FL 33825***

***Phone: (863) 399-2058***

***Email: [Mcnoto64@gmail.com](mailto:Mcnoto64@gmail.com)***



**Academic Awards or Honors:**

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**List your community activities (non-school) including all offices held.**

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**List in order of preference three colleges, universities, business or vocational schools you formally applied to for admission:**

	<u>Name of Institution</u>	<u>Address</u>	<u>Accepted</u>
(a)	_____	_____	Yes ___ No ___
(b)	_____	_____	Yes ___ No ___
(c)	_____	_____	Yes ___ No ___

What is your chosen major? \_\_\_\_\_

Will your parents assist you financially in continuing your education? Yes \_\_\_ No \_\_\_

**Affidavit:**

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. I understand that falsification of information may result in termination of any scholarship granted and that this application becomes the property of the Florida Frontiersmen, Inc.

\_\_\_\_\_  
Applicant Signature

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

Date \_\_\_\_/\_\_\_\_/\_\_\_\_