

THE COMMUNITY FOUNDATION OF BURKE COUNTY

THE LARRY AND LOUISE HUFFMAN SCHOLARSHIP

DESCRIPTION

As teachers, Larry and Louise Huffman devoted their lives to serving others, especially the youth of Burke County. In tribute to this genuine concern and compassion for young people, the Huffman family founded this scholarship in their names. With the support of the East Burke Kiwanis Club, the Huffman family established this scholarship to provide financial support to graduating seniors or students already enrolled in college.

ELIGIBILITY

One scholarship will be offered each year to a resident of Eastern Burke County and a graduating senior attending East Burke High School, Jimmy C. Draughn High School or Burke Middle College. The Scholarship will be awarded without regard to race, creed, sex, ethnic background or handicap. The Scholarship is available to a student who is planning to attend a four year college or university; currently attending graduate school; and/or currently enrolled in college.

CRITERIA (IN ORDER OF PRIORITY)

- 1st Must be an eastern Burke County resident; graduating senior from East Burke High School, Jimmy C. Draughn High School or Burke Middle; or a student currently enrolled in college or attending graduate school.
- 2nd Must be preparing for a career in teaching or in athletic training. (If planning to coach, that is an added bonus.)
- 3rd Demonstrates academic success
- 4th Demonstrates good character
- 5th Consideration will be given for financial need and athletic achievement

SELECTION PROCESS

The Scholarship Committee at high schools in Burke County may submit one nominee each for this scholarship. The recommended recipient's application, including all attachments, must be sent to The Larry and Louise Huffman Scholarship Committee by March 17th. This committee may submit one nominee for this scholarship to the Community Foundation of Burke County by April 1st. The Scholarship Committee of the Community Foundation will review all nominees and make its recommendation to the Board of Directors. The Board of Directors of the Community Foundation of Burke County shall give final approval to the nominee who is awarded the scholarship.

PAYMENT OF AWARDS

Payment of scholarship awards will be made directly to the college or university, in accordance with financial policies established by the Board of Directors of the Community Foundation of Burke County.

The scholarship recipient must provide the Community Foundation of Burke County with an official transcript from the college or university he/she attended at the end of each academic year for which a scholarship is received.

Application Process:

1. Complete the application form
2. Include a high school transcript or, if applicable, a college/university transcript
3. Attach a small photograph of yourself
4. Attach a FAFSA form
5. Include three (3) letters of recommendations from non-related individuals who know you and your capabilities

Application must be postmarked by March 17th. Applications postmarked after March 17th and those that are incomplete, will not be considered. If you have questions, please call Jonathan Huffman (828-874-4540) or Lisa Huffman (828-874-4540).

Mail application to:

The Larry and Louise Huffman Scholarship Chairman
P.O. Box 134
Hildebran, NC 28637

Or Email completed application to:

lhuffmanjr@aol.com

Please submit completed application to The Huffman Scholarship Committee by March 17th

THE COMMUNITY FOUNDATION OF BURKE COUNTY
THE LARRY AND LOUISE HUFFMAN SCHOLARSHIP APPLICATION

Please read each entire section before completing the application.

APPLICANT INFORMATION

Name: _____
Last First Middle "Goes By"

Permanent Address: _____

Email: _____ Telephone: _____

Date of Birth: _____ Place of Birth (City/State or Country): _____

High School: _____
School Name School Phone Number

Please include a transcript with your application and a small photograph of yourself.

FAMILY INFORMATION

(List first, the parent/guardian you live with most, if you are still living with your parents or a guardian)

Parent/Guardian 1: _____
First Name Last Name Work Phone #

Occupation: _____ Employer: _____

Parent/Guardian 2: _____
First Name Last Name Work Phone #

Occupation: _____ Employer: _____

Household: (check one) Single Parent: _____ Two Parent: _____ Living Independently: _____

Number of People Living In Household: _____

Check if Applicable: () Father Deceased () Mother Deceased () Parents Separated () Parents Divorced

Please include a completed copy of FAFSA or W-2 for previous year with your application.

Parent Education Levels:

- Mother a) High School Graduate: Yes _____ No _____ b) Four-year College Graduate: Yes _____ No _____
- Father a) High School Graduate: Yes _____ No _____ b) Four-year College Graduate: Yes _____ No _____

List names and ages of brothers & sisters living at home or in college who are dependents of parent (s) or guardian (s):

Name: _____ Age: _____ College: _____

Name: _____ Age: _____ College: _____

Name: _____ Age: _____ College: _____

Name: _____ Age: _____ College: _____

NAME _____

SCHOOL ACTIVITIES

In the space provided below or on a separate page, please list extracurricular activities in which you have participated during the past four years of high school. If currently attending college or graduate school, attach a list of the extracurricular activities that you have been involved in since entering college. Include clubs, sports, student government, fine arts, etc.

ACTIVITY	9 th	10 th	11 th	12 th	APPROX. TIME OUTSIDE CLASS HRS/WK WKS/YR	LEADERSHIP POSITIONS, LETTERS EARNED, AWARDS, RECOGNITION, ETC.

COMMUNITY & PERSONAL ACTIVITIES

In the space provided below or on a separate page, list community, church/synagogue and personal activities in which you have participated during the past four years of high school. If currently attending college or graduate school, attach a list of the community, church/synagogue and personal activities in which you have participated since entering college. Include volunteer work, youth programs, athletic programs, music, dance, scouting, 4-H, or hobbies to which you have devoted time.

ACTIVITY	9 th	10 th	11 th	12 th	APPROX. TIME OUTSIDE CLASS HRS/WK WKS/YR	LEADERSHIP POSITIONS, LETTERS EARNED, AWARDS, RECOGNITION, ETC.

WORK EXPERIENCE

In the space provided below or on a separate page, please list any work experience (including self-employment) you have had during the past four years. Include summer jobs as well as employment during the school year. Complete this information beginning with your most recent work experience.

EMPLOYER – Contact Person & Phone	Position	Dates Employed	Hours/Week

NAME _____

COLLEGE/UNIVERSITY INFORMATION (FOR THOSE PLANNING TO ATTEND COLLEGE FOR THE FIRST TIME)

What major(s) would you like to pursue? _____

Please complete the following information for your top three college choices.

1. School/City/State: _____

Admission status: _____ Application Pending _____ Enrollment Offered _____ Enrollment Offer Accepted

2. School/City/State: _____

Admission status: _____ Application Pending _____ Enrollment Offered _____ Enrollment Offer Accepted

3. School/City/State: _____

Admission status: _____ Application Pending _____ Enrollment Offered _____ Enrollment Offer Accepted

COLLEGE STATEMENT: Attach a brief statement telling us why these institutions are most appealing to you.

COLLEGE/UNIVERSITY INFORMATION (FOR THOSE CURRENTLY ENROLLED IN COLLEGE OR GRADUATE SCHOOL)

What major are you pursuing? _____

Please list the colleges you have attending and are currently enrolled in:

1. College/University/City/State: _____

Class Status: _____ Freshman _____ Sophomore _____ Junior _____ Senior Years Attended: _____

2. College/University/City/State: _____

Class Status: _____ Freshman _____ Sophomore _____ Junior _____ Senior Years Attended: _____

3. College/University/City/State: _____

Class Status: _____ Freshman _____ Sophomore _____ Junior _____ Senior Years Attended: _____

RECOMMENDATIONS

Please make copies of the attached form and submit no more than three (3) recommendations from a teacher or school official, a club or community sponsor/advisor or any non-family member. All recommendations should be on the attached form and returned to the scholarship committee in a sealed envelope with signature across the seal.

OTHER AWARDS

Please list below or on a separate page the name, amount and status of any grants or scholarships for which you have applied for the coming school year.

NAME OF AWARD	AMOUNT	GRANTED	PENDING

Please notify the Community Foundation of Burke County office of any grants or scholarships you receive after you submit this application.

CERTIFICATION

In voluntarily submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted. I give my permission to this Scholarship Selection Committee, the Community Foundation of Burke County Scholarship Committee, the Directors of the Community Foundation of Burke County and the Community Foundation of Burke County staff to release information contained in this application for the purposes of determining and publicizing scholarship awards.

Applicant's Signature _____ Date _____

- **Before submitting this application, please make a copy for your records.**
- **Insert all attachments inside the application and clearly indicate your name on the top right corner of all attachments.**
- **Do not use staples, since applications must be copied.**

Please return a completed application to The Larry and Louise Huffman Scholarship Chairman, P.O. Box 134, Hildebran, NC 28637 or email completed application packet to: lhuffmanjr@aol.com

For more information, contact:

Jonathan Huffman (828-874-4540) or Lisa Huffman (828-397-6260)

