



Putnam County Gator Club

P.O. BOX 1774 • PALATKA, FL 32178-1774

UNIVERSITY OF FLORIDA SCHOLARSHIP APPLICATION

Complete this application and return it to the above address. All items must be completed. The deadline for this application is **April 15, 2024**. All applications **must be postmarked no later than the deadline**.

1. NAME

(Mr./Mrs./Ms.) _____
First Middle Last

2. PERSONAL INFORMATION

A. Permanent Home Address _____

Phone: _____ Cell: _____

B. Legal Resident of _____
State County

C. Date of Birth _____
Month / Date/ Year

D. Place of Birth _____
City State

3. EDUCATIONAL INFORMATION

A. Date accepted by U F _____ (**Include a copy of your acceptance letter if just starting**)
Classification upon entry FR ____ SO ____ JR ____ SR ____

B. Academic Major _____

C. High School Information
Name of High School _____
Grade Point Average _____
ACT or SAT Scores _____

(PLEASE ATTACH YOUR MOST RECENT ACADEMIC TRANSCRIPT.)

D. Community College or other Higher Institutions (If applicable)
Name of Institution _____
Address _____
Date of Graduation _____
Degree Received _____
If not graduated, credit hours completed _____
Grade Point Average _____

(PLEASE ATTACH YOUR MOST RECENT ACADEMIC TRANSCRIPT.)

4. ADDITIONAL INFORMATION

A. Briefly describe your career plans.

B. List any honors you have received, clubs or community activities in which you have participated, and other talents or interests you may have. (You may include an attachment.)

C. Are you or your parents a member of the Putnam County Gator Club? _____ If so, how long? _____ Briefly describe how your family has contributed to this organization.

5. FINANCIAL STATEMENT (CONFIDENTIAL)

A. Parents or guardian

Name _____

Address _____

Telephone Number _____

B. Occupation of

Father _____ Salary _____

Mother _____ Salary _____

C. Parent status: Married _____ Divorced _____ Separated _____ Other _____

D. With whom do you live? Both parents _____ Mother _____ Father _____ Other _____

E. What is your marital status? Single _____ Married _____ Divorced _____

F. List names and amounts of other financial aid (scholarships, grants, and loans) that you know or anticipate you will receive.

6. COMMENTS — We want to know more about you!

Explain extenuating circumstances or other matters that you would like to bring to the attention of the scholarship award committee. Why do you feel that you are deserving of this scholarship?
(Please feel free to add an attachment to this application!)