# 2020 Singleton Defense Support the Community Scholarship Application Form

**STUDENT INFORMATION**

Name (Last, First, MI):

Name and city of school you are attending or planning to attend:

Present mailing address (Street, Apt. # City, State, Zip code):

Telephone #:

E-Mail:

**ACADEMIC INFORMATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Schools | Location | Dates | Degree / Major | Date of Graduation |
|  |  |  |  |  |

Current Major(s):

**State your cumulative GPA and highlight honors or awards that you have received:**

**Name of the non-profit where you volunteered:**

**Briefly describe your duties as a volunteer**

**Name of the person you reported to at the non-profit:**

**Is there any other relevant information you want us to consider when reviewing your application?**

**ESSAY INSTRUCTIONS:**

Please submit a one to three (1-3) page typed essay describing your experiences while volunteering and working with a non-profit organization in your local community. Additional suggested topics for the essay include discussing how the experience impacted you as a person and/or your pursuit of higher education; how the experience may have impacted your plans for the future; what you learned from the experience about yourself; and what you learned from the experience about your community and its needs. |

**CERTIFICATION**:

The undersigned scholarship applicant hereby grants permission to use his/her name and to quote his/her essay (in whole or in part) or use his/her Entry (in whole or in part) in all promotional and other activities relating to the scholarship, including, but not limited to, publication in written materials, posting on websites and other social media, and use in radio and television broadcasts. In the event that a Scholarship applicant participates in any promotional or other activity relating to the Scholarship, the applicant authorizes Angela Singleton, Attorney at Law to use, re-use, publish, re-publish, and copyright audio and/or visual reproductions of the applicant's voice and/or image, alone or with other persons, with or without use of the applicant's name.

I hereby certify that the information I have provided on this Application Form and in any attached materials is true and complete.

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

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

Return completed application and requisite materials by e-mail by June 30, 2020 to: mailto:communityscholarship@singletondefense.com

Note: This application and supporting material must be received by June 30, 2020. Notification of the scholarship award decision will be made July 2020.

Angela Singleton, Attorney at Law

Singleton Defense

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