

**The Savannah Area REALTORS® Scholarship Fund**

**Provided by**

**The Savannah Community Foundation, Inc.**

**For the Benefit of Graduates of Bryan, Chatham,  
and Effingham Counties, Georgia High Schools**

**The eligibility criteria are as follows:**

1. Applicants must be a graduating Bryan, Chatham or Effingham County high school senior
2. Applicants must have at least a cumulative “C” grade point average at the time of application.
3. Applicants must have demonstrated community involvement outside the high school setting.
4. Applicants must have demonstrated financial need.
5. Recipients must attend an accredited college, university or technical institute in Georgia. The recipient must agree to do twenty-five (25) hours per academic year of approved community service work (e.g., Scouts, Big Brother/Big Sister, Church, Hospital, Senior Citizens, Department of Leisure Services, etc.).
6. Recipients may not be related to any Scholarship Committee member closer than second cousin by blood or marriage.
7. Scholarships must be awarded without regard to race, religion, age or national origin.

Scholarships will be awarded for tuition, room, board, books and other necessary educational expenses. Payment will be made to the college on behalf of the recipient in halves prior to the start of each semester. If the student withdraws and otherwise would be entitled to a tuition refund, the refund money must be returned to the Fund.

Nomination of the recipient(s) for final approval by the Foundation shall be determined by The Savannah Area REALTORS® Scholarship Committee identified by reference to the Fund Agreement, applying the above criteria.



**APPLICATION FORM  
 THE SAVANNAH AREA REALTORS® SCHOLARSHIP  
 Offered In Conjunction With  
 THE SAVANNAH COMMUNITY FOUNDATION, INC.**

The scholarship amount is up to \$8,000 per year,  
 divided among several recipients.

***The completed application and all supplemental materials must be submitted as ONE PDF document to: [scholarships@savfoundation.org](mailto:scholarships@savfoundation.org) by March 31, 2023 at 12:00 Noon. No late or incomplete applications will be accepted.***

***Your PDF document should be named (if possible) as:  
 Realtors Scholarship – Your name***

1. \_\_\_\_\_  
 Last Name First name Middle Name

2. Permanent Address: \_\_\_\_\_  
 Street or P. O. Box  
 \_\_\_\_\_  
 City State Zip Code

3. Telephone Number: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

4. Email: \_\_\_\_\_

5. Name(s), Address, Phone Number and Email Address of Custodial Parent(s)/Guardian: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

6. Personal Adult References (2): \_\_\_\_\_ (Phone#)  
 \_\_\_\_\_ (Phone#)

7. High School: \_\_\_\_\_ (Phone#)

8. Cumulative High School GPA Through Last Semester: \_\_\_\_\_

9. Two (2) 12th Grade Teachers who know the applicant:

\_\_\_\_\_  
 Name, Address and Telephone Number

\_\_\_\_\_  
 Name, Address and Telephone Number

10. List any honors or recognition you have received:

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11. Extracurricular Activities:

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12. List other activities (community service, social, religious, etc.):

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**13. YOUR COLLEGE PLANS**

Describe your present field of interest for entering college:

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List each College/University to which you have applied and the current status of each application:

<u>Institution</u>	<u>Status</u>
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## ACADEMIC INFORMATION

Your high school transcripts must be included in this application.

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## ESSAY

Please include with this application a brief statement about yourself discussion the things that **influenced you to decide to attend college**, your college goals, your work/career goals or plans after receiving your college degree and any other information you consider pertinent for the Scholarship Committee to know in considering your application.

(200 - 300 words)

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## FINANCIAL INFORMATION

Please provide the following information

Anticipated Annual College Expenses		Anticipated Annual Income	
Tuition/Fees	_____	Family contributions toward school expenses	_____
Books & Supplies	_____	Applicant's savings or earnings for school	_____
Personal Expense	_____	Financial Aid from your school:	
Room/Board	_____	Grants	_____
Other (Specify)	_____	Scholarships	_____
Total	_____	Loans	_____
		Work/Study	_____
		Other (specify)	_____
		Any other income for school expenses (specify)	_____
		Total anticipated income	_____

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## CHECK LIST (Applicant must initial each item to document it is complete.)

- \_\_\_\_\_ 1. Original application with all supporting documentation.
- \_\_\_\_\_ 2. Complete scholarship package submitted in time to be RECEIVED by the Foundation by deadline described above.

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_