



Serenade Heights College Scholarship

Serenade Heights, Inc. will award two \$5,000 scholarships to graduating high school seniors raised by a single mother. Recognizing the financial challenges single mothers face, this scholarship reflects our commitment to giving back—empowering exceptional students to pursue their educational dreams and build a brighter future.

Eligibility: Open to graduating high school seniors in Cherokee County with a GPA of 3.0 or higher who were raised by a single mother. Must attend college in USA.

Amount: Serenade Heights will award two scholarships for \$5,000 each

Application: See attached

Application Open Date: March 23

Application Close Date: April 27

Email completed application to:

Lori Shackleford

lori@serenadeheights.com

Interviews: May 13

Award Scholarship: May 21

If you have any questions, please contact Lori Shackleford at 770-733-9728



Scholarship Application Form

Personal Information

Name : _____

Address : _____

_____ ZIP Code : _____

Date of Birth : _____ Gender: _____

Phone No : _____ Email : _____

Educational Background :

High School Name & Address _____ GPA: _____ Graduation Date: _____

_____ Counselor: _____

_____ Academic Honors _____

Dual Enrollment

College name _____ Credits Earned _____

Extra Curricular Activities

Groups	Leadership Roles	Community Service/ Volunteer Experience
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

References

Name	Relationship	Email/phone
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

● **College Applications**

College Name	Accepted? Y/N	Committed? Y/N
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

● **Future Career Goals:**

● **Work Experience :**

Company Name /address/ phone	Position	Date Employed
_____	_____	_____
_____	Supervisor	Responsibilities
_____	_____	_____

Company Name /address/ phone	Position	Date Employed
_____	_____	_____
_____	Supervisor	Responsibilities
_____	_____	_____

_____ I affirm that the information provided here is truthful and represents my genuine experience and qualifications.

By signing your name below, you are certifying that the information contained herein is true and complete to the best of your knowledge, as of this date. Additionally, you agree to allow your academic transcript , grade point average, and program of study information to be shared with scholarship committee members, if requested. Further, you are providing permission to use your name and likeness for promotional purposes associated with this scholarship competition. Please be aware, this is a competitive process and not all applicants will receive a scholarship award and no guarantees in that regard are stated or implied. Funds awarded through this process are to be used for postsecondary education related expenses only. Any and all tax liabilities associated with this award are the sole responsibility of the recipient.

Signature_____

Please attach a copy of your transcript.