**R. Tammy Fleming Lupus Foundation Scholarship Application 2019**

***$1000 Scholarship will be awarded to a Lupus Warrior and/or an immediate family member that is accepted as a full time student at a college or university for the upcoming academic semester.***

DEADLINE for scholarship applications is May 13, 2019.

1. Refer to application process below for a list of the supporting documents. Incomplete applications will not be considered.
2. If any question does not apply to you in this application, please put N/A in the space.
3. Type or print legibly. Illegible applications will be returned to you.
4. You will be notified by phone or email regarding the status of your application.
5. If you have any questions about the application, please call Tangela Sylvie Scholarship Chair.

318-294-0080 or by email at RTFWalktoendlupus@gmail.com

**SCHOLARSHIP AWARDS**

The R. Tammy Fleming Lupus Foundation awards a scholarship on the basis of a comprehensive process. Areas that are reviewed by the committee include, but are not limited to the following: Academic Accomplishments, Community Service and Purpose. The Foundation pays scholarship funds directly to the recipient. Scholarships are awarded annually. This Scholarships is awarded without regard to race, color, ethnicity, gender or sexual orientation. The Scholarship is awarded based upon the availability of funds and additional qualifying criteria. The scholarship will be presented at the R. Tammy Fleming Lupus Walk on May 19, 2019 at Columbia Park.

**CRITERIA**

* + Applicants must be completing or have completed high school successfully with a minimum unweighted GPA of 2.5 on a 4.0 scale.
	+ Applicants must be accepted as a full time student at a college or university for the upcoming academic semester.
	+ Applicants must be a citizen or legal permanent resident of the United States.
	+ Applicants must complete and submit a Scholarship Application by May 13, 2019.

**TIMELINE**

* + Applications are due May 13th of the current calendar year.
	+ Applicants are notified if awarded a scholarship by May 15, 2019.

**Application Process**

**SCHOLARSHIP APPLICANTS MUST PROVIDE:**

* + Completed application form.
	+ Official proof of academic standing.
	+ Proof of acceptance at an academic school for post-secondary studies.
	+ A copy Student ID

 **Required Information (PLEASE PRINT): GPA** Click or tap here to enter text.

Have you applied to any College/University? Yes: [ ]  No: [ ]

Have you been accepted by any College/University? Yes: [ ]  No: [ ]  If so, which intuition?

 Click or tap here to enter text.

Name: Click or tap here to enter text. Sex: M/F Age:Click or tap here to enter text. DOB Click or tap to enter a date.

Address: Click or tap here to enter text.City:Click or tap here to enter text. StateClick or tap here to enter text. Zip Click or tap here to enter text.

Phone:Click or tap here to enter text.

Email Address: Click or tap here to enter text.

Parent(s) or Legal Guardian(s): Click or tap here to enter text.

Name: Click or tap here to enter text.

**Please list the following information on a separate sheet if needed.**

|  |  |
| --- | --- |
| 1 | **AREA OF STUDY:** What do you want to study and why? Click or tap here to enter text. |
| 2 | **ORGANIZATIONS and SCHOOL EXTRA-CURRICULAR ACTIVITIES:** Please list community organizations such as service, volunteer and religious organizations in which you are now active or have previously been active. Also, list school extra-curricular activities in which you have participated. Note leadership roles and dates. Note leadership roles and dates.Click or tap here to enter text. |
| 3 | **RECOGNITIONS**: Please list important awards and recognitions received. Note organizations presenting honor and date.Click or tap here to enter text. |
| 4 | **PURPOSE:** Explain the importance of you receiving The R. Tammy Fleming Lupus Foundation Scholarship.Click or tap here to enter text. |
| 5 | **CAREER PLANS:** What are your career plans and what do you see yourself doing in the next 10 years?Click or tap here to enter text. |

**STATEMENT OF ACCURACY**

I hereby affirm that all the above stated information provided by me to the R. Tammy Fleming Lupus Foundation Scholarship Committee is true, correct and without forgery. I also consent that my picture may be taken and used for any purpose deemed necessary to promote the “*R. Tammy Fleming Lupus Foundation”* Scholarship Program.

I hereby understand that if chosen as a scholarship winner, according to scholarship policy, I must provide evidence of enrollment/registration at the post-secondary institution of my choice before scholarship funds can be awarded.

Signature of scholarship applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The deadline for this application to be received by R. Tammy Fleming Lupus Foundation**

 **May 13, 2019 no later than 4:00 p.m.**

**Mail application:**

**R. Tammy Fleming Lupus Foundation Scholarship Program**

**7205 Wilshire Drive**

**Shreveport, La. 71106**

**Application must be postmarked by May 10, 2019**

**or**

**Submit in person:**

**Cherokee Park Elementary**

**2010 East Algonquin Trail**

**Shreveport, La. 71107**