

SOUTHSIDE BUSINESS MEN'S CLUB
P.O. Box 5053
Jacksonville, Florida 32247
www.southsidebusinessmensclub.com
PAULINE SMITH SCHOLARSHIP APPLICATION

Name _____

Address _____ Zip _____

Telephone _____ Date of Birth _____

Email Address _____

Mother _____ Occupation _____

Father _____ Occupation _____

Siblings: Number _____ Ages _____

Family's Gross Annual Income _____

What Percentage of College Expenses are Paid by Your Family [excluding you] _____

Years of College Completed _____

Grade Point Average (Attach Transcript) _____

College Major _____

College you will Attend Next Year _____

If not your current college, you must attach a Letter of Acceptance prior to issuance of the Scholarship

Career Interests:

Your Signature: _____ Date: _____

By your signature above you grant SBMC approval to identify you in press releases and other media as an award recipient.

Activities

Extra-Curricular School Activities:

Community Activities:

Awards and Special Recognition Received, Scholarships:

Hobbies:

Employment:

Any Other Information You Wish to Provide:

Essay:

On one to four separate pages write an essay on the importance of civic awareness in America today.