

**Foundation for Eleanora R Spratt Scholarships Application**

**Date of Application Submission:** \_\_\_\_\_

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City, State, Zip** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Name of Academic College/University or Certification Program applicant is enrolled in:**

\_\_\_\_\_

**Address where the scholarship should be mailed:**

\_\_\_\_\_

**Signature of the Applicant (can be electronic)** \_\_\_\_\_

**Date** \_\_\_\_\_

For purpose of evaluation to determine who will receive a Foundation for Eleanora R Spratt Scholarship, please complete a compelling essay of at least five hundred (500) words as to your goals for seeking assistance to attain academic or professional certification assistant. The essay may include any hardships or sacrifices endured, personal challenges, volunteer efforts, community outreach, etc., as to why you are deserving of the scholarship.

Essay: