



## The Villages Motor Racing Fan Club College Book/Tuition Scholarship

One Non-Renewable Scholarship<sup>1</sup> to be awarded to a senior with motor racing interests who will be pursuing higher education in an academic field related to the world of motor racing. For example, applicants pursuing an engineering or business degree, a technical school curriculum in a motor racing-related field (e.g., metal fabrication), or other motor racing-related field (such as motor sports journalism) would be eligible to apply.

The Scholarship will be awarded to a Florida High School Senior from the Tri County area (Lake, Sumter, and Marion Counties) or to a high school senior related to a member of The Villages Motor Racing Fan Club who will be attending any accredited four-year college or university or an accredited Community College or vocational/technical school. The student must be enrolled in college full time and have a 2.5 GPA or above. Students applying for the Scholarship must submit an acceptance letter from college of choice, a transcript of grades, two letters of reference, and an essay (maximum two pages) describing their interests in motor sports and their long-range career objectives.

### Eligibility:

1. The scholarship is limited to High school seniors who will graduate at the end of the current school year and who reside in Lake, Sumter or Marion Counties or who are related to an active member of The Villages Motor Racing Fan Club.
2. Each candidate must provide written proof of acceptance/enrollment in an accredited 2-year college, 4-year college/university or vocational/technical school.
3. Each candidate must provide a transcript of all high school grades and 12<sup>th</sup> grade test scores.
4. Each candidate must provide two letters of reference. From non-family members.
5. Each candidate must provide a maximum two-page essay summary of educational objectives identifying how this scholarship would aid in achieving career goals. Please include anything the scholarship committee would need to know to judge the application. Examples: your future plans, your motor racing interests, etc.

### Application:

The application must be completed by the student and received by The Villages Motor Racing Fan Club no later than **5:00pm, on March 31 of the year of graduation**. Applications must be mailed to Wendy Touchette, 1577 Blythewood Loop, The Villages, FL 32162. If you have any questions please call 352-430-0239.

### Selection:

The Villages Motor Racing Fan Club Board of Directors' Scholarship Committee will evaluate the applications and make the award recommendations to the club board for final approval. All board decisions are final.

### Notification:

A personalized certificate will be presented to the scholarship winner. Winners will be notified by phone or mail on or about **April 30, of the year of graduation**.

### Disbursement:

The scholarship money will be disbursed and made payable to the student upon receipt of proof of payment of tuition or required books and/or supplies.



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<sup>1</sup> The Villages Motor Racing Fan Club Board of Directors, based on projected finances for that year, will set the amount available for scholarship awards at the beginning of each year.



Name (Full Name) \_\_\_\_\_ Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_

Applicant's Home Phone: \_\_\_\_\_

High School You Attend: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name of Guidance Counselor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

School Participation (Organizations, athletics, activities, include offices held & and grades participated): \_\_\_\_\_

\_\_\_\_\_

Community Service Participation: \_\_\_\_\_

\_\_\_\_\_

Academics and other awards: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**This is to certify that the information contained in this application is true. All signatures are required.**

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

**Parent or Guardian Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Guidance Counselor's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_