



2019-2020 Scholarship Program for Graduate Students

Guidelines

The James M. & Erma T. Freemont Foundation announces the 2019-2020 Freemont Scholars Awards Program.

Program Guidelines & Priorities:

- * Seeking graduate students with a record of leadership and volunteerism in the community in non-school sponsored activities and participation in extracurricular school activities.
- * Applicants must be pursuing a graduate degree in the health and medical sciences with the intention of pursuing that discipline as a career.
- * Applicants must be accepted or enrolled in an accredited graduate degree program in the United States for the Fall 2019/Spring 2020 academic year (enrollment must begin in the Fall).
- * Applicants must have a minimum GPA of 3.0 (on a 4.0 scale).
- * Applicant must be a United States Citizen.
- * Graduate student must apply to and be accepted into a graduate school by July 1, 2019.
- * Applicants must submit two letters of recommendation: professor, counselor, or administrator and one from a community member or officer of an organization in which the applicant is affiliated.
- * Applicants must submit the most recent official transcript. This transcript must contain the official school stamp or seal.
- * The letters of recommendation and transcript may either be included in the application package or sent separately.
- * Applications and all supporting documents must be postmarked January 18, 2019. Late applications and supporting documents will not be accepted.
- * **THE APPLICATION AND ESSAY MUST BE TYPED.**

Mail completed typed application package to:

Freemont Foundation Scholarship Committee
P.O. Box 82563
Hapeville, GA 30354

The scholarship award will be announced in April 2019. **Scholarship funds will be paid in September 2019 for the Fall semester directly to the college/university** and not to the student. It will be the student's responsibility to submit to the Foundation at that time proof of enrollment for the Fall 2019 semester that will include student ID number and college information.

Applications may be downloaded from the Freemont Foundation's website at www.FreemontFoundation.com

Please submit any questions to: info@FreemontFoundation.com



— James M. & Erna T. —
Freemont Foundation

GRADUATE STUDENT SCHOLARSHIP APPLICATION 2019-20

Please type your answers.	
1.	Last Name: _____ First Name: _____
2.	Mailing Address Street: _____ City: _____ State: _____ Zip: _____
3.	Daytime Telephone Number: () _____ Email Address: _____
4.	Date of Birth: Month Day Year Gender: _____
5.	Cumulative Grade Point Average (GPA): _____ (On a 4.0 scale) Attach proof of GPA. Your most recent official school transcript is required.
7.	Name and location (city/state) of graduate school attending: Name and location of undergraduate school you attended: Your hometown (city/state):
8.	(If your resume or activities sheet answers question 8, please attach and skip to question 9.) A. List any academic honors, awards and membership activities while in college: B. List your hobbies, outside interests, extracurricular activities and school-related volunteer activities: C. List your non-school sponsored volunteer activities in the community:
9.	List your field of study: Anticipated date of graduation: What degree are you seeking?

10. On a separate sheet please write an essay (300-350 words) answering the questions below:

“Why I am Choosing the Health or Medical Sciences as a Career”



— James M. & Erma T. —
Freemont Foundation

STATEMENT OF ACCURACY

I hereby affirm that all the information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship winner my picture and personal information will be required and used to promote the Foundation's scholarship program. I understand that if chosen as a finalist, an interview may be requested.

I hereby understand that if chosen as a scholarship winner, according to James M. & Erma T. Freemont Foundation Scholarship policy, it is my responsibility to remit to the Foundation the appropriate information by the deadlines indicated in the award letter in order for my scholarship to be paid directly to my educational institution.

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

Signature of scholarship applicant: _____ **Date:** _____

Checklist

- Typed Application
- Typed Essay
- Typed Resume/Activity Sheet (if not answered completely on question 8)
- Two Letters of Recommendation
- Official School Transcript (most recent) containing the school seal/stamp
- Name on all materials

All supporting documents that are sent separately must be postmarked by January 18, 2019.

Please place your name on all materials. Do not staple items together.

MAIL COMPLETE APPLICATION PACKAGE TO:

**James M. & Erma T. Freemont Foundation
Scholarship Committee
P.O. Box 82563
Hapeville, GA 30354**

REMINDER:

**The application and supporting documents must be postmarked by
January 18, 2019 NO EXCEPTIONS!**