

**WHITLOW-OSBORNE SCHOLARSHIP**  
**ADMINISTRATED BY**  
**NORTH CAROLINA ASSOCIATION OF RESCUE &**  
**EMERGENCY MEDICAL SERVICES, INC.**

P.O. Box 1914  
Goldsboro, N.C. 27533-1914  
Telephone 919/736-0506 Fax 919/736-7759 E-Mail [ncarems@ncarems.org](mailto:ncarems@ncarems.org)

**CHILDREN OR MEMBERS SCHOLARSHIP APPLICATION**

2-YEAR \_\_\_\_\_ \$2,000.00

**STUDENT MUST ENTER INTO AN EMERGENCY SERVICES CURRICULUM**

Available to High School Seniors in the following counties: Alamance, Alleghany, Ashe, Forsyth, Guilford, Randolph, Rockingham, Stokes, Surry, Watauga, Wilkes and Yadkin.

**Funded by the families of Carson and Maggie Whitlow and William F. Osborne.**

**APPLICANT'S INFORMATION** \* PLEASE TYPE OR PRINT \* **DEADLINE: MARCH 31**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CELL PHONE #( ) \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

STUDENT'S AGE \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ S.S.# \_\_\_\_/\_\_\_\_/\_\_\_\_

WHAT UNIVERSITY, COLLEGE, COMMUNITY COLLEGE, TRADE OR TECHNICAL SCHOOL IN NORTH CAROLINA DO YOU PLAN

TO ATTEND? \_\_\_\_\_

**\*I have read and understand the eligibility rules and I agree I will abide by same. I agree that if any changes occur in my eligibility, I will notify the NCAR&EMS immediately. Failure to do so may void my scholarship.\***

\_\_\_\_\_  
**APPLICANT'S SIGNATURE**

\_\_\_\_\_  
**DATE**

**FAMILY INFORMATION**

FATHER'S NAME \_\_\_\_\_ S.S.# \_\_\_\_/\_\_\_\_/\_\_\_\_

APPLICANT'S RELATIONSHIP \_\_\_\_\_ RESCUE/EMS MEMBER: YES \_\_\_\_ NO \_\_\_\_

PHONE # D: ( ) \_\_\_\_\_ N: ( ) \_\_\_\_\_ ( ) C: \_\_\_\_\_ OCCUPATION \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_ S.S.# \_\_\_\_/\_\_\_\_/\_\_\_\_

APPLICANT'S RELATIONSHIP \_\_\_\_\_ RESCUE/EMS MEMBER: YES \_\_\_\_ NO \_\_\_\_

PHONE # D: ( ) \_\_\_\_\_ N: ( ) \_\_\_\_\_ ( ) C: \_\_\_\_\_ OCCUPATION \_\_\_\_\_

NUMBER OF CHILDREN IN FAMILY \_\_\_\_\_ AGES OF CHILDREN \_\_\_\_\_

DO YOUR PARENTS HAVE OTHER CHILDREN CURRENTLY ATTENDING ADVANCED SCHOOLS?

YES\_\_\_ NO\_\_\_ IF YES, WHERE \_\_\_\_\_

-Please do not staple, tape or paper clip application or other enclosed information.

-Please include 1 - 8 listed below with your application.

-Please type or print on sheets included with application.

-You may copy these sheets if additional space is needed.

-(List by years, 9th through 12th grades only.)

1. **EXTRA-CURRICULAR ACTIVITIES** (such as sports, band, clubs, offices held, etc.)
2. **CHURCH and COMMUNITY ACTIVITIES** (such as choir, usher, scouts, 4-H, etc.)
3. **HONORS** (such as academic awards, coaches awards, scouting awards, club awards, etc.)
4. **Type or printed description of your plans after college.**
5. **HIGH SCHOOL TRANSCRIPT** (including S.A.T. scores or ACT scores).
6. **WORK EXPERIENCE**, if any.
7. **FINANCIAL NEED** such as medical expenses, care of additional family members, etc.
8. **STUDENT FINANCIAL RESOURCES** you may be receiving or are going to receive. (such as Social Security Benefits, Scholarships, grants or loans.)

If you have any questions regarding the scholarship program, please call the NCAR&EMS at 919/736-0506.

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### **CHECK LIST.....HAVE YOU COMPLETED YOUR APPLICATION???**

- |  |                           |
|--|---------------------------|
| ___ APPLICANT'S SIGNATURE              | ___ EXTRA-CURRICULAR LIST |
| ___ CHURCH & COMMUNITY LIST            | ___ HONORS LIST           |
| ___ HIGH SCHOOL TRANSCRIPT             | ___ WORK EXPERIENCE       |
| ___ DESCRIPTION OF PLANS AFTER COLLEGE |                           |
| ___ INCLUDING S.A.T. SCORES OR ACT     |                           |

### EXTRACURRICULAR ACTIVITIES

List activities in column at left. Check years involved in columns at right.

[illegible]



### CHURCH & COMMUNITY ACTIVITIES

List activities in column at left. Check years involved in columns at right.

List activities	9th	10th	11th	12th

### HONORS, AWARDS, SPECIAL RECOGNITION LIST

List activities in column at left. Check years involved in columns at right.

[illegible]

### WORK EXPERIENCE

List work experience in column at left. Check years worked in columns at right.

	9th	10th	11th	12th

### **FINANCIAL NEED**


### **FINANCIAL RESOURCES**


List financial resources, social security benefits, scholarships, grants or loans which you will be receiving. Please indicate if it will be for each year of school or a one-time award.

**DESCRIPTION OF PLANS AFTER COLLEGE**