THE FLORIDA RV TRADE ASSOCIATION

SCHOLARSHIP APPLICATION 2020-2021



Please type or print clearly. Must be completed in full.

Student Status (C	check one): Fu	Full-Time (9 or more hours)		Part-Time (8 hours or less) _
Name of Applicant:		Age:	Date of	Birth:
Residential Address:				
City:				
Telephone:				
# of Family Members Living at Home: Mo	other F	ather	Brother(s) _	Sister(s) Other
# of Dependents Currently in College:				
Are you employed? If so, where?				
Total Family Income for 2019: less than \$				
\$20,000 -	\$40,000	\$60,000	- \$80,000 _	\$100,000 + Over
Sponsor Information				
FRVTA Member Company:				
Address:				
City:	State:		Zip: _	
Name of Company Rep:	S	ignature (req	uired):	
Education History				
Name of High School Attended:			Ye	ear of Graduation:
High School GPA: Highest SA	AT Score:		Highest	ACT Score:
Currently in College?: If so, Name of Coll	lege:			
# of Credits Completed:	_ Currei	nt GPA:		_
College Information				
Name of Applied College:				City:
How do you intend to pay for College: Loa	ans S	cholarships	Work	Family Other
Have you been accepted? Do you plan	n to live on ca	mpus?	Projected	Date of Graduation:
List any extracurricular activities, honors, etc.:				
List other scholarships applied for or receiving an	nd the amoun	its (Failure to	disclose can dis	qualify or rescind):
				\$
				\$
				\$
Signature of Applicant:				Date:
Enclosed with Application: Mus	st be receive	d by June 5,	2020	

1) Copy of most recent high school or college transcript

2) Essay of not more than 500 words entitled, "My Goals and Objectives for Attending College"