

# COLUMBUS OLD SCHOOL EDUCATIONAL FOUNDATION, INC.



## SCHOLARSHIP APPLICATION

Columbus Old School Educational Foundation, Inc. is a non-profit organization which promotes post-secondary educational opportunities for students by offering scholarships to offset the costs of going to college and universities which may be two year or four year institutions of higher learning. Scholarships are available for graduating high school students and currently enrolled college students from the Tri-City areas of Columbus, Ft. Benning, and Phenix City.

Name of applicant: \_\_\_\_\_  
Last name First name Middle Initial

Address: \_\_\_\_\_  
(Street number and street name)

City: \_\_\_\_\_

State: \_\_\_\_\_

Student's Contact Phone Number: \_\_\_\_\_

Date to graduate (or graduated) from high school: \_\_\_\_\_

Name of High School/University/College: \_\_\_\_\_

High School/University/College G.P.A.: \_\_\_\_\_ minimum 3.0 on a 4.0 scale; if other scale, explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Description of extra-curricular activities. Specify offices held.**

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**School counselor/advisor who can verify participation:** \_\_\_\_\_

**Phone number of counselor/advisor for verification:** \_\_\_\_\_

**Describe your plans after graduating:**

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**Description of community involvement/community service/volunteer service:**

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**Community leader who can verify community involvement:** \_\_\_\_\_

**Phone number of community leader providing verification:** \_\_\_\_\_

**Date to enter (or entered) college:** \_\_\_\_\_

**Name of college or university:** \_\_\_\_\_

**Location of post-secondary institution named above:** \_\_\_\_\_

**Number of years of college completed (if any):** \_\_\_\_\_

**Major and Minor:** \_\_\_\_\_

**Description of College participation in collegiate organizations. Indicate offices held:**

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**Verification of participation in collegiate organizations. Specify offices held.**

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**Professional/Career choice:**

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**I have submitted a photograph to be used if I am selected as a scholarship recipient:  
Yes / No**

**I have signed and submitted the attached "Assignment of Rights & Consent to Publish  
Scholarship Information": Yes / No**

**Attach a recent picture here.**

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**Signature of Applicant**

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**Date**

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**Signature of Parent (if applicant is younger than 21)**

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**Date**

**Please submit a short essay describing your career/life goals:**

**ASSIGNMENT OF RIGHTS & CONSENT TO PUBLISH SCHOLARSHIP  
INFORMATION**

**KNOW ALL PERSONS BY THESE PRESENTS:**

**THAT I, \_\_\_\_\_, do hereby give Columbus Old School Educational Foundation, Inc. full rights to publish my name and where I live (city, state,) my pertinent family information, the high school where I am to graduate or graduated, academic information, college I am attending, photographs that I have provided, and college update information; however, actual street address and phone number will not be disclosed.**

**I understand that if I am selected to receive this scholarship award it must be presented to the student by January 31<sup>st</sup> of the following calendrer year or the scholarship will be voided.**

**I understand that by execution of this agreement, I am relinquishing my rights to any future compensation for reproduction, publication or use of the above information by Columbus Old School Educational Foundation Inc. in its print or electronic publication or on its website.**

**I hereby specifically waive my right to review or approve the modification of the above information. (Modifications may be made to accommodate size or content restrictions. Modifications will not be made to “distort” or “falsify” any information provided.)**

**I understand that this agreement in no way obligates Columbus Old School Educational Foundation Inc. to publish or use the above-described information.**

Executed on the date of: \_\_\_\_\_.

By: \_\_\_\_\_

(Print Name)

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(Signature)

Witness: \_\_\_\_\_ Signature: \_\_\_\_\_

(Print Name)

**COSEF'S NON-DISCRIMINATORY POLICY:**

**Columbus Old School Educational Foundation, Inc. will not discriminate in any educational practice, educational program, or educational activity on the basis of race, color, religion, national origin, gender, age, or disability. COSEF's commitment to equal opportunity includes non-discrimination on the basis of sexual orientation and gender identity. The President of the Board of Directors has been designated to handle inquiries regarding the non-discriminatory policy and can be reached at (706) 358-7746.**