Elbert County Gun Club, Inc.

1239 Ruckersville Rd

P.O. Box 126 Elberton, Georgia 30635 706-213-0098

www.elbertcogunclub.com ell

elbcogun@bellsouth.net

NAME:					
ADDRESS:					
E-MAIL:					
Telephone:			_ Date of I	Birth:	
FATHER:					
MOTHER:					
SCHOOL:					
GRADE:		GPA/SCALE: _		SAT/ACT SCORE	
RANK/CLASS	S SIZE:	CO	URSE OF STU	JDY:	
EXTRACURICULAR ACTIVITIES LIST MEMBERSHIPS IN SCHOOL RELATED ORGANIZATIONS					
				HIGH SCHOOL AND WHE	Ŋ

LIST ACTIVITIES WITH COMMUNITY LEADERSHIP AND/OR INVOLVMENT
LIST AWARDS RECEIVED FOR SCHOOL OR COMMUNITY INVOLVEMENT
LIST JOB EXPERIENCE
You may attach additional sheets to complete any of the above questions.
Write a brief ESSAY and tell why you should receive this scholarship.
Include three (3) LETTERS OF REFERENCE with this application. One letter MUST be from a High School Teacher or College Instructor. These letters can NOT be

Attach a one-page letter outlining your future plans, goals, financial need and any other information that you think is important for the committee to review.

from relatives of the applicant. Please include reference's phone number, address, and

how you know this person.

BY SIGNING THIS APPLICATION, I HEREBY GRANT ELBERT COUNTY GUN CLUB PERMISSION TO CONTACT ANY AFOREMENTIONED PERSONS IN REGARDS TO THIS APPLICATION.

ALSO, I GRANT ELBERT COUNTY GUN CLUB THE UNCONDITIONAL	
RIGHT TO USE MY NAME, PHOTOGRAPH AND ESSAYS IN CONNECTION	V
WITH ANY PUBLICATIONS.	

Signature of Applicant	Date

PLEASE RETURN THE COMPLETED APPLICATION, ESSAY, AND LETTERS OF REFERENCE BY March 27, 2017. MAIL TO:

Elbert County Gun Club PO Box 126 Elberton, GA 30635