



• P.O. Box 395 • Hanover • Virginia • 23069 •
Phone: (804) 264.0505 • Fax: (804) 264.3260

2013 Past Presidents Council Scholarship Application

Qualifications for the Scholarship:

1. Virginia resident.
2. Employed and endorsed by a VFDA member firm in good standing.
3. Explanation of financial need and supporting documents.
4. 2.0 grade point average (on 4.0 scale)
5. Have completed two year applied science associates degree and have accumulated 60 credits at an accredited college or university.
6. Written essay with the theme: "Why I Chose Funeral Service as My Profession." No less than 1,000 words and not to exceed 2,500 words. Essays must be typewritten, double spaced, with one-inch margins. Essays containing excessive spelling, punctuation or grammatical errors will be subject to automatic disqualification.
7. All applications/essays must be postmarked by **June 15, 2013**. Late or incomplete applications will not be considered.
8. Scholarships will be awarded at the sole discretion of the Scholarship Committee of the Board of Trustees of the Virginia Funeral Directors Association Foundation based on the evaluation of the above named items. All scholarships awards will be paid directly to the college where enrolled.

Scholarship(s) will be awarded each year based on the amount previously approved by the Past Presidents Council.

Applicants will receive consideration without discrimination because of race, creed, color, sex, age, marital status, national origin or handicap.

Name (First/Middle/ Last) _____

Address _____

City, State, Zip _____

Firm _____ Endorsement Signature _____

Telephone _____ Fax _____

Email _____



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College(s) Attended

(1) Name of Institution _____
Address _____
City, State, Zip _____
Semester/Quarter Hours Completed _____ Degree _____ Year _____

(2) Name of Institution _____
Address _____
City, State, Zip _____
Semester/Quarter Hours Completed _____ Degree _____ Year _____

Current College Matriculation

Name of Institution _____
Address _____
City, State, Zip _____
Semester/Quarter Hours Completed _____ Cumulative Grade Point Average _____

Employment

Name of Employing Firm _____
Address _____
City, State, Zip _____
Duties Performed _____

Current Extracurricular Activities

Special Skills and/or Hobbies

I certify that to the best of my knowledge the information contained in this application is correct and complete. It is my intention to continue my Mortuary College Education and to enter the field of Funeral Service upon successful completion of professional education, examination and licensure.

Signed _____ Dated _____

Witnessed _____

(Employer)

**Mail or email this form, explanation of financial need, and required essay to:
VFDA, P.O. Box 395, Hanover, Virginia 23069
Phone (804) 264-0505 Fax (804) 264-3260 Email: lwhittaker@vfda.net**