



Eda and Cliff Viner Community Scholars Foundation Student Application

Dear Student Applicant,

Thank you for your interest in the Eda and Cliff Viner Community Scholars Foundation, Inc. We are a scholarship program that provides South Palm Beach County High School students with four year scholarships to colleges and universities in the State of Florida public educational system.

Our program accepts applications from graduating high school students from our partner high schools who meet the eligibility requirements below and can demonstrate significant financial need. This is a “last dollar” scholarship – the student must access all other potential sources of financial aid first, before this scholarship is validated. It will not replace other sources of financial aid. The scholarship will cover tuition and room & board that are not already covered by other financial aid.

Please complete ALL sections of this application. Use N/A if question does not apply. Please be sure to attach all required documentation as listed below.

Eligibility Requirements:

- Include at least two (2) letters of recommendation from faculty members. Must be on school letterhead and *sealed in envelope*.
- *Official* copy of High School Transcript. Must be *sealed in envelope*.
- SAT/ACT Score Sheet
- FAFSA SAR
- College letter of Predicted Awards (Grants, Bright Futures, etc.)
- Copy of College Acceptance Letter
- Documented minimum 100 Hours of Community Service

Please submit completed application and additional required documentation to:

Eda and Cliff Viner Community Scholars Foundation, Inc.
777 Yamato Road, Suite 300
Boca Raton, FL 33431
(561) 544-4436
info@vinerscholars.org



Eda and Cliff Viner Community Scholars Foundation

Student Application

PERSONAL INFORMATION

DATE: ___/___/___

Student Name: _____

Address: _____

City: _____ Zip: _____

Home Phone: (____) _____ Mobile: (____) _____

E-mail: _____

Select best way to reach you: Home Mobile Email

Date of Birth: ___/___/___

US Citizen: ___ YES ___ NO RACE: _____

Father's Name: _____ Occupation: _____

Father's Address: _____

Mother's Name: _____ Occupation: _____

Mother's Address: _____

Student Lives with: (Check one) ___ Mother & Father ___ Mother ___ Father

___ Other: _____

Number of Siblings: _____ Number of Siblings in College: _____

Are your parents able to contribute to your education: ___ YES ___ NO

If yes, how many dollars PER SEMESTER: \$ _____

WORK RELATED ACTIVITIES FOR THE STUDENT

Are you employed? ___ YES ___ NO If yes, where: _____

How many hours a week on average? _____

Estimated personal income for this year: \$ _____



Eda and Cliff Viner Community Scholars Foundation

Student Application

COLLEGE

Name and address of Institution where you have been accepted for fall enrollment:
(Please attach letter of acceptance.)

Major: _____ Minor: _____

HIGH SCHOOL

Name of Current High School: _____

What is your cumulative unweighted GPA? _____

Please list your SAT / ACT Scores:

SAT _____ SAT _____ SAT _____
Reading/Writing Math Total

ACT _____ ACT _____
English Math Reading Science Total

List any High School Honors: _____

Extracurricular activities (clubs, memberships, sports): _____

Volunteer & Service Projects: _____

Number of Community Hours completed during High School: _____



Eda and Cliff Viner Community Scholars Foundation

Student Application

Have you completed any college level courses? _____

Please list: _____

Have you received other scholarships? If so, please attach offer letters with amount received and disbursement arrangements: _____

EXPENSES

Estimated College Expenses for the Year (Fall & Spring): Please attach reference used to obtain figures such as school cost of attendance fee sheet.

Tuition/Fees: \$ _____

Books & Supplies: \$ _____

Housing (Room): \$ _____

Food/Meals (Board): \$ _____



Eda and Cliff Viner Community Scholars Foundation

Student Application

ESSAY QUESTIONS Please answer all essay questions with 150 words or less:

Question 1:

Please detail any hardships or challenges you and your family may have faced that impacted your decision to apply for our scholarship.

Question 2:

Describe your favorite extracurricular or community service activity and detail your participation.



Eda and Cliff Viner Community Scholars Foundation

Student Application

Question 3:

If you could fast forward to your senior year in college, what would be your major and where do you see yourself working?

I attest that all information is complete and accurate.

Applicant Signature: _____

Date: ___/___/___

Parent/Guardian Signature: _____

Date: ___/___/___

Parent/Guardian Printed Name: _____