

THE CLARENCE & BARBARA TALIAFERRO SCHOLARSHIP PROGRAM

Who Can Apply?

To Qualify Applicants Must:

- Have a cumulative grade point average of 2.5 or higher on a 4.0 scale
- Classify as one of the following
 - be a high school senior who has applied to and enrolled in a full-time course of study at an accredited four-year college or university
 - be a college freshman, sophomore or junior currently enrolled in a full-time course of study at an accredited four-year college or university
 - be a community college student who has enrolled in a full-time course of study
- Demonstrate financial need according to the Free Application for Federal Student Aid Form (FASFA) and the Student Aid Report (SAR) form.

Selection Process

The Selection Committee reviews all applications to determine the best overall applicants. The highest-rated students are selected as scholarship recipients. Scholarships are awarded on the basis of academic potential, need, participation and leadership in school and community activities, short answers and one essay response.

Award Amount

The Clarence & Barbara Taliaferro Scholarship will award a scholarship in the amount of \$1000 for each award recipient.

Payment of Award

On or around September 10th, a check will be mailed to the scholarship recipient's college or university of choice, with the first check being in the amount of \$500 and the second check mailed on or around December 30. Checks are made payable to the scholarship recipients' school with the recipient's name and Student ID number on the check.

Obligations & Responsibilities

Scholarship Recipients must notify the Clarence & Barbara Taliaferro Scholarship Committee of any change of address, school enrollment or other relevant information. Except as described above, no obligation is assumed by The Clarence & Barbara Taliaferro Scholarship Committee or Darryl Martin Taliaferro. Applicants are responsible for the admission to an accredited four-year college or university and for meeting its entrance requirements. Applicants are also responsible for gathering and submitting to the selection committee the information necessary for selecting the scholarship recipients as outlined below. If awarded a scholarship, recipients must enter school no later than the fall term of the year of the award.

Questions/Concerns

Students or interested parties having questions about The Clarence & Barbara Taliaferro Scholarship Program should email SCHOLARSHIP@darryltaliaferro.org

Applicants Must Submit the Following:

- A current color photo(headshot)
- Completed Application Form
- Most Recent Official Transcript
 - COLLEGE APPLICANTS: Provide college transcripts from all previously attended institutions if applicable (transcripts from current institutions that include transferred credits/courses is acceptable)
- Official ACT or SAT score report
- Two signed letters of recommendation submitted on official letterhead
 - COLLEGE APPLICANTS: We require at least one recommendation from a faculty member in your field of study. The second letter of recommendation should be from someone who can provide insight into your personal character, potential, motivation, and ability to successfully complete a rigorous course of study.
- FAFSA Student Aid Report
- High School Applicants Only
 - A copy of your diploma/graduation certificate and indication of class ranking
 - A copy of your college or university acceptance letter

APPLICATIONS WILL BE ACCEPTED BETWEEN JUN 1 – SEPT 1

MAIL COMPLETED SCHOLARSHIP APPLICATIONS TO:

The Clarence & Barbara Taliaferro Scholarship Program
Attention: Scholarship Committee
P. O. Box 331134
Nashville, TN 37203



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Instructions

Application must be typed and include all applicable signatures. Please mail to the address at the bottom of the application no later than September 1.

GENERAL BACKGROUND INFORMATION

Applicant's Full Name: _____

Date of Birth (MM/DD/YYYY) _____/_____/_____

Applicant's Permanent Address:

Street _____

City _____ State _____ Zip _____

Primary Phone: (____) _____ Secondary Phone (____) _____

Social Media Information:

Facebook: _____ Twitter: _____

Instagram: _____ Snapchat: _____

TikTok: _____ Other: _____

Email Address: _____

Parent / Legal Guardian Name: _____

COLLEGE OR UNIVERSITY YOU PLAN TO ATTEND

Name _____

Street _____

City _____ State _____ Zip _____

EDUCATIONAL BACKGROUND INFORMATION

Please list the PREVIOUS school(s) you have attended (use additional paper if necessary)

Name of Institution	Full Address & Phone Number	Dates Attended	Grade Point Average

Graduation Month/Year _____ / _____ Major/Minor (if applicable) _____

SAT Results: V _____ M _____ W _____ TOTAL: _____

ACT Results (if applicable) _____

List all extracurricular school activities below:

List all community service/volunteer activities below:

List and describe your leadership experience(s):

List any awards and/or honors you have received. Include the year the honor was received

SPECIAL CONSIDERATIONS (can include some of the following: death of a student's parent or guardian; disability of a student; or other unusual circumstance(s):

EMPLOYMENT HISTORY

List your last three employers in the space provided.

ONE

Employer _____

Address _____

City _____ State _____ Zip _____

Your Role _____

Dates of Employment _____

TWO

Employer _____

Address _____

City _____ State _____ Zip _____

Your Role _____

Dates of Employment _____

THREE

Employer _____

Address _____

City _____ State _____ Zip _____

Your Role _____

Dates of Employment _____

REFERENCES

List the names and contact information of the TWO people who will be writing letters of recommendation on your behalf. These individuals should NOT be related to you.

ONE

Name _____

Address _____

City _____ State _____ Zip _____

Primary Number: (____) _____ Secondary Number (____) _____

Email Address _____

TWO

Name _____

Address _____

City _____ State _____ Zip _____

Primary Number: (____) _____ Secondary Number (____) _____

Email Address _____

SCHOLARSHIP INFORMATION

List ALL scholarships, financial aid, or other financial assistance you have been awarded for your college education (use additional paper if necessary):

Name of Scholarship	Name & Address of person/entity giving the scholarship	Amount of Scholarship

Please provide a list of all colleges/universities to which you have applied (use additional paper if necessary):

Name of Institution	Full Address & Phone Number	Accepted? Yes / No	If yes, provide a copy of letter [X]