Sampson and Davis Scholarship Foundation, Inc.
5104 N Orange Blossom Trail #107
Orlando, Fl 32810
Phone: 407-309-7980
Fax: 407-479-3210

1. Scholarship Guidelines:

Sampson and Davis Scholarship Foundation Inc. Grants are not automatically renewed. You must reapply each year.

A completed application does not guarantee funding.

Awards are made for attendance at the educational institution you indicate on the application and are not transferable to another institution after grant is awarded.

Requirements:

- Financial need.
- Graduation from an Orange County Public High School earned after June 1, 1996 with a minimum of two years in Orange County Public High School.
- G.E.D. Applicants must submit copy of G.E.D. Diploma.
- Full-time attendance, seeking a degree at an approved post-secondary institution.
- Study towards completion of first undergraduate degree only.
- Copy of ALL pages of your SAR (Student Aid Report) for the year applied.
- Copy of Financial Aid Award Letter from your college. We will accept downloaded Award Letters from the Internet.
- College sophomores and beyond who are unable to attain their Financial Aid Award Letter by the SDSFI Grant deadline may submit prior year's Award Letter along with a current Student Aid Report (SAR). You MUST submit the NEW Award Letter as soon you receive it. Failure to do so may potentially cause the loss of the SDSFI Grant Awarded.
- If an applicant's choice of college, university, or technical school changes after submitting the application, a Financial Aid Award Letter from your NEW school must be submitted to the SDSFI Grant Office by the application deadline. Failure to submit changes to the SDSFI Grant Committee by the deadline may result in the application being disqualified.

- Returning SDSFI recipients who are college students, as well as, first time college applicants must submit a college transcript. Transcripts can be from an internet college account portal or from the school's registrar office.
- Send the completed "Permission to Release Information" to the Financial Aid Office at your college. Do not turn it in with your SDSFI Grant Application.
- Mail only completed application packets. You can scan and email a completed SDSFI Grant Application along with ALL attached SAR, unofficial College Transcripts and Award Letters to sampsondavisfoundation@gmail.com
- Incomplete applications will not be accepted.
- Mail photocopies, not originals, of these documents.
- No extensions will be granted beyond application deadline (Postmark deadline is always the last Saturday in June 2014).
- Each semester the student must have a 3.0 GPA
- Each student must attend the quarterly conferences

For more information, please visit

Sampson and Davis Scholarship Foundation Inc.
GRANT APPLICATION

Applications must be postmarked by the deadline of the last Saturday in June.
Deadline: July 1, 2021
Applications postmarked after the deadline will not be reviewed.
Incomplete applications will not be accepted or reviewed.
Submit complete application to:
SDSFI Grant Application
5036 Dr. Phillips Blvd. Suite 124
Orlando, Fl 32819

Please fill in the blanks or circle answers below: All questions must be answered and written or typed legibly.

1. Social Security Number:

_____

2. Orange County Student ID Number:

_____

3. Last Name:

_____

4. First Name & Middle Name:

_____

5. Date of Birth:

_____

6. Male/Female:

_____

7. Address, City, State and Zip Code:

_____

8. Telephone Number:

_____

9. Email Address:

_____

10: Name of High School:

_____

Please fill in the blanks or circle answers below: All questions must be answered and written or typed legibly.

11. Graduation Year/ GED: _____

12. Orange County Public High School GPA weighted_____ un-weighted _____

13. College/University you will attend: _____

(The SDSFI Grant is not transferable from one institution to another after the award has been made)

14. Campus/Branch: _____

15. Major: _____

16. Where will you live: (on campus) (off campus) (with family)

17. Year in college for Fall Semester: 1 2 3 4 5

18. Have you ever applied for a SDSFI Grant? Yes No

19. If yes, did you receive the SDSFI Grant? Yes No

20. Parent's monthly rental or mortgage payment $ _____

21. Home Value $ _____

22. How much is owed on it? $ _____

23. What is your mother's highest level of education?   _____

24. What is your father's highest level of education? _____

25. Please list all immediate family members who will be attending college during the 2014-2015 school year? Are they also applying for the SDSFI Grant?

NAME	COLLEGE	YEAR	APPLYING FOR SDSF?

26. Please list any other scholarships received other than Florida Bright Futures not mentioned on Financial Aid Award letter?

Scholarship Name	2014-2015 Amount Only

27. Do you have a Florida Prepaid Contract?

Please check one:

_____ I do not have a Florida Prepaid Contract.

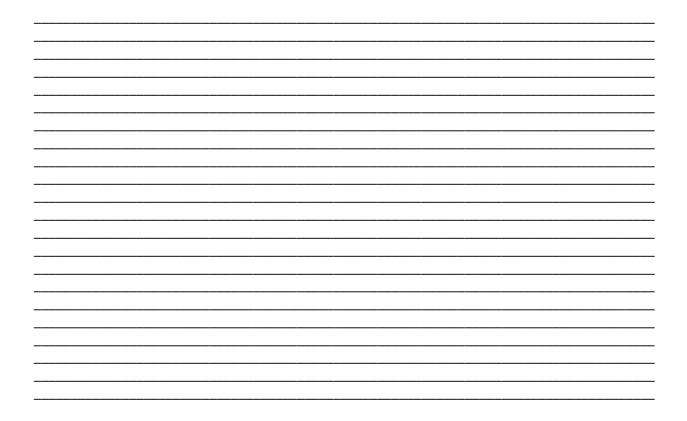_____ Yes, I have a Florida Prepaid Tuition Contract.

_____ Yes, I have a Florida Prepaid Tuition and Dormitory Contract.

SCHOLARSHIP NAME 2021-2022 Amount Only

HARDSHIP CIRCUMSTANCES (OPTIONAL)

If there are special circumstances that you would like the committee to consider when evaluating your application, please document on this page only. You must submit documentation for any hardship. Hardships are, but not limited to: recent death of parent/legal guardian; caring for older parent or special needs child; loss of employment since submission of financial aid forms; bankruptcy in which you are required to pay creditors from your current earnings; IRS debts (must show documentation of payment arrangements), medical expenses (not covered by health insurance), other students in college (must submit award letters for each student).

PLEASE DO NOT WRITE AN ESSAY. STATE THE FACTS IN A CLEAR AND CONCISE MANNER. YOUR INFORMATION SHOULD NOT EXCEED ONE PAGE IN LENGTH. PLEASE ATTACH ONLY NECESSARY DOCUMENTS.

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APPLICATION CHECKLIST

___ Complete Application

___ Copy of entire SAR (student aid report); must show Expected Family Contribution

___ Copy of your Award Letter (We will accept downloaded Award letters from internet)

___ College transcript showing cumulative GPA (Either from your school internet account or registrar's office. If the internet transcripts do not show cumulative GPA that is ok)

___ Copy of GED Diploma (GED students only)

___ Hardship Circumstances Page (If applicable as it is OPTIONAL)

___ Make photocopy of entire application packet before sending for your records

___ Send completed "Permission to Release Information" (To the Financial Aid Office at your college)

Remember scanned completed SDSFI Grant Applications along with attached SAR, College transcripts (downloaded from school internet) and Award letter may also be emailed to sampsondavisfoundation@gmail.com

As a grant recipient I give permission for pictures, personal quotes and contact information to be used by SDSFI and Orange County Public Schools. I certify that all statements I have made herein to be true and correct. I understand that if I submit an incomplete application, do not answer all questions on the application, or submit all required documents; my application will be deemed incomplete and will not be considered for this grant.

_____   _____

Student Signature   Date

_____

Student Name (Print)

A Personal Note You May Want To Let The Selection Committee Know Regarding Your
Application And The Application Requirements.

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DO NOT INCLUDE THIS LETTER WITH YOUR APPLICATION.

MAIL DIRECTLY TO YOUR FINANCIAL AID OFFICE

Date:

To: Financial Aid Director
Name of College/University:
Address:
City/State/Zip:

      RE: Permission to Release Information to SDSF, Inc.

Dear Financial Aid Director:

I have applied for a grant from the Sampson and Davis Scholarship Foundation, Inc. (SDSF, Inc.). All of my required documents have been submitted to SDSF, Inc. and my file is complete. I hereby authorize you to discuss my eligibility to receive the grant by telephone, fax or mail with a representative of the SDSF, Inc. should they contact you.

Sincerely,

_____
Signature of Student   Student Name (print)   Social Security Number

_____
Signature of Parent   Parent Name (print)   Date