

Baldwin County Electric Membership Charitable Foundation

2027 College Scholarship Application

Are you a student in Baldwin or southern Monroe County with college dreams?

The Baldwin County Electric Membership Charitable Foundation is proud to support the future of our community by helping local students achieve their educational goals.

Thanks to the generosity of Baldwin EMC members who participate in Operation Round Up, we're able to offer college scholarships to students in Baldwin and southern Monroe Counties. **Scholarships are valued at up to $3,750 per year.**

To apply, please submit a completed application and all supporting documents to:

Baldwin EMC
Attn: Charitable Foundation Scholarships
P.O. Box 220
Summerdale, AL 36580

BALDWIN ELECTRIC MEMBERSHIP FOUNDATION
OPERATION UP ROUND

BALDWIN EMC

Application Deadline: February 16, 2027

Scholarship Eligibility and Requirements

Basis of Selection for Scholarship Consideration

The scholarship committee will consider the following when selecting recipients: scholastic achievement, character, leadership, service, career and life goals, financial need and any other pertinent information or circumstances that may heighten the need for this scholarship.

Eligibility for Scholarship Consideration

All applicants must have a permanent address within Baldwin County or Baldwin EMC's service area in southern Monroe County and a 2.0 GPA to be eligible for this scholarship.

Requirements for Scholarship Consideration

All applications must be filled out honestly and completely. Applications must be received in person or postmarked no later than **Tuesday, February 16, 2027.**

High School Applicants

- ☐ Provide certified and sealed transcript of grades directly from high school to the Foundation.
- ☐ Provide a copy of one of the following:
  - ACT score of 15 or higher
  - SAT score of 700 or higher
- ☐ Attach a typed, double-spaced essay describing in 75-100 words your educational, career and life goals. Include why you have chosen this goal and how you will give back to your community/society.
- ☐ Submit two letters of recommendation from non-family members.
- ☐ Submit one letter from a high school authority using the form enclosed on page 10.
- ☐ Provide a copy of the most current tax return for parents and/or applicant as required on page 7. (Pages 1 & 2 of Form 1040 or 1040EZ)
- ☐ If not a United States citizen or permanent resident, please provide a certified copy of student Visa.

College Applicants

- ☐ Provide certified transcript of grades directly from the current institution to the Foundation.
- ☐ Attach a typed, double-spaced essay describing in 75-100 words your educational, career and life goals. Include why you have chosen this goal and how you will give back to your community/society.
- ☐ Submit two letters of recommendation from non-family members.
- ☐ Submit one letter from a college authority using the form enclosed on page 10.
- ☐ If not a United States citizen or permanent resident, please provide a certified copy of student Visa.
- ☐ Provide a copy of most current tax return for parents and/or applicant as required on page 7. (Pages 1 & 2 of Form 1040 or 1040EZ)

Scholarship Terms and Conditions

1. Scholarship winners will be announced in the spring prior to recipient's graduation. Scholarship distribution is contingent upon the recipient obtaining a high school diploma or equivalent.

2. Students must attend an accredited four-year college, junior college, technical school or vocational school to remain eligible for scholarship funds.

3. Students must enroll on a full-time basis and maintain a GPA of 2.0 or higher to remain eligible for scholarship funds. If a student fails to qualify as a full-time student, any unused funds are to be returned to the Foundation.

4. Scholarship will be paid directly to the educational institution indicated by the scholarship recipient. If the student withdraws from school, any unused funds are to be returned to the Foundation.

5. Scholarship may be available for renewal for the immediate four academic years following the student's high school graduation. **Renewal of the scholarship is based on continued eligibility and receipt of a completed renewal scholarship application by the deadline.** Renewal is at the sole discretion of the Baldwin County Electric Membership Charitable Foundation Board.

6. Scholarship winners will be asked to sign an agreement indicating they understand the terms and conditions of their scholarship and return it to the Foundation. Failure to return this form by the designated deadline will result in forfeiture of scholarship funds.

7. If the scholarship recipient declines or cannot accept the scholarship, the recipient agrees to notify the Baldwin County Electric Membership Charitable Foundation through written correspondence postmarked no later than **May 26** of the current year.

Acceptance of scholarship funds by the recipient will constitute acceptance of these terms and conditions.

Applications may be delivered in person to Baldwin EMC's Headquarters, located at 19600 Highway 59, Summerdale, Alabama, or sent by mail to:

Baldwin EMC
Attn: Charitable Foundation Scholarships
P.O. Box 220
Summerdale, AL 36580

Applications and all required documents must be postmarked or received in person by February 16, 2027. Applications received after the deadline will be automatically disqualified.

Scholarship Application

Name of Applicant: _____
Last First Middle

US Citizen ☐ **Student Status Visa** ☐ **Permanent Resident** ☐

Address: _____
Physical Address P.O. Address

_____
City or Town State County Zip Code

_____
Telephone Number

Email Address _____ **Date of Birth** _____
Required

Name of Parent (Mother): _____
Last First Middle

Address: _____
Physical Address P.O. Address

_____
City or Town State County Zip Code

_____ _____
Telephone Number Email Address

Name of Parent (Father): _____
Last First Middle

Address: _____
Physical Address P.O. Address

_____
City or Town State County Zip Code

_____ _____
Telephone Number Email Address

Scholarship Application

Name of Legal Guardian: _____
Last First Middle

Address: _____
Physical Address P.O. Address

_____
City or Town State County Zip Code

_____ _____
Telephone Number Email Address

Applicant's High School and/or College:		
Name	**City or Town**	**State**

Date of High School/College Graduation: _____

College Major: _____

Colleges Applied (list schools in priority order):		
Name	**City or Town**	**State**

Scholarship Application

All Scholarships Applied For					
Name of Scholarship	Amount	Received	Denied	Unknown	Renewable
		☐	☐	☐	☐
		☐	☐	☐	☐
		☐	☐	☐	☐
		☐	☐	☐	☐
		☐	☐	☐	☐

Community & Extracurricular Activities:	Dates	Hours Per Week

Honors & Awards:	Date(s) Received

Applicant's Employment History: (Most Recent First)						
Employer	City	State	Zip Code	Dates From	To	Hours Per Week

Financial Information

The following questions will help the Foundation understand the applicant's financial need. **If parents or guardians provide more than 50% of the applicant's living expenses, the parents or guardians financial information should be listed.**

Has the applicant completed a Free Application for Federal Student Aid (FAFSA)? Yes ☐ No ☐

If yes, please list the applicant's Student Aid Index (SAI): _____

Will the applicant be eligible for Pell Grants? Yes ☐ No ☐ Unsure ☐

What is your household's annual income (before taxes): _____

Please list any additional monthly income sources for applicant and parents/guardians:

	Parent Income	Applicant Income	Total Amount
Salary			
Bonus, tips and commissions			
Social Security			
Supplemental Security Income (SSI)			
Real Estate Income			
Other financial support: (Alimony, Child Support, Dividends & Interest, Parental Assistance, Student Loans/Grants, etc.)			
Other Income			
Total Additional Monthly Income	**$**	**$**	**$**

Other Members of Household (including those away at college):		
Name	Relationship	Attending College?
		Yes ☐ No ☐
		Yes ☐ No ☐
		Yes ☐ No ☐
		Yes ☐ No ☐

Please attach a copy of parents'/guardians' and applicant's most recent tax returns (Pages 1 & 2 of Form 1040 or 1040EZ). **If parents or guardians provide more than 50% of applicant's living expenses, the parents'/guardians' and applicant's most recent tax forms are required.**

Financial Information

Please list all monthly expenses for applicant and parents/guardians:

		Monthly Payment
Housing (Check Box)	Mortgage ☐ Rent ☐	
Food		
Utilities	Electric	
	Gas	
	Telephone	
Transportation	Automobile Payments	
	Gasoline	
Insurance	Medical	
	Life	
	Automobile	
Charge Accounts/Credit Cards (Specify Type)		
Loans		
Property		
Taxes (Specify Type)		
Other Expenses (Specify Type)		
	Total Monthly Expenses	**$**

Please list any other special financial circumstances you'd like the Foundation to consider:

_____

_____

The information contained in this statement is for the purpose of obtaining funding from the Baldwin County Electric Membership Charitable Foundation, Inc., on behalf of the undersigned. Each undersigned understands the information provided herein shall be used to determine grant funding, and each undersigned represents and warrants the information provided is true and complete. Furthermore, the Baldwin County Electric Membership Charitable Foundation, Inc. may consider this statement as continuing to be true and correct until a written notice of a change is provided. The Baldwin County Electric Membership Charitable Foundation, Inc. is authorized to make all inquiries they deem necessary to verify the accuracy of the statements made herein.

I have reviewed the checklist and terms and conditions provided on pages two and three and I understand that an incomplete application will be automatically rejected.

Signature of Applicant	Date
Signature of Parent or Guardian	Date

Applications and required documents must be postmarked or received in person by February 16, 2027.

Educator's Recommendation Form

Name of Applicant: _____

Last First Middle

Name of Current School: _____

To Be Completed by Educator/Counselor

1. How well, how long and in what capacity have you known the applicant?

   _____

   _____

2. How firm is the applicant's commitment to his/her proposed field of study?

   _____

   _____

3. In your opinion, do you feel that this student will continue his/her education until completion?

   _____

   _____

4. How would you rate the applicant in the following areas? If you are unable to evaluate an area, leave it blank.

	Excellent	Above Average	Average	Below Average
Seriousness of Purpose				
Initiative				
Maturity				
Adaptability				
Enthusiasm				
Emotional Stability				
Leadership				
Public Speaking				

5. Please cite a specific example of how the applicant has demonstrated the above qualities.

   _____

   _____

_____ _____

Name Title or Position

_____ _____

Signature Date