



The Florida P.E.O. Scholarship was established in 1994 to provide financial assistance for tuition and fees to qualified women who will be pursuing undergraduate study at a Florida college or university.

### ELIGIBILITY

- Florida resident who is a citizen or permanent legal resident of the U.S. or Canada.
- Accepted for admission for first year of full-time post-secondary (collegiate) study at an accredited Florida college or university (private or public).
- Dual enrolled high school students are eligible.
- Pursuing a course of study leading to associate's or bachelor's degree.
- Sponsored by a Florida chapter of the P.E.O. Sisterhood.
- Meets requirements of scholarship, character, and financial need.
- Has high scholastic standing as measured by GPA of 3.0 or greater, class rank and standardized test scores.

### GRANT AMOUNTS

- Awards up to \$2,500.00 for tuition and fees. Award amounts based upon number of applicants and funds available each year.
- May be renewed for second year of full time study (24 hours in an academic year) pending submission of a completed renewal application, minimum 3.0 cumulative collegiate GPA, and sponsoring chapter recommendation.

### APPLICATIONS

- Applicants must be sponsored by a Florida chapter of the P.E.O. Sisterhood.
- For information about finding a local chapter to consider sponsoring an applicant for the scholarship, send email query to: [FLPEOS@gmail.com](mailto:FLPEOS@gmail.com)
- Applications must be provided by a member of P.E.O.
- Student applications are due to the sponsoring Florida chapter by **January 15<sup>th</sup>**.
- Completed applications are due from the local chapter chair to the state scholarship committee chair by February 15<sup>th</sup> prior to the student's next academic year of full time study.

#### LOCAL CHAPTER CONTACT:

*Susie Harrington 904-810-8625  
email - Sharrington17@comcast.net*

The P.E.O. Sisterhood ([www.peointernational.org](http://www.peointernational.org)) is a philanthropic educational organization. FLPEOS 2019



## FLORIDA P.E.O. SCHOLARSHIP -- GUIDELINES FOR APPLICANT

- 1.1 CONGRATULATIONS! You have made a first step toward your college education by applying for a FLORIDA P.E.O. SCHOLARSHIP. This scholarship is funded by Florida Chapters of the P.E.O. Sisterhood, a Philanthropic Educational Organization. Scholarships are awarded for financial assistance for **TUITION, BOOKS AND FEES** only, as required for enrollment or attendance. *Students with Florida Pre-Paid College Fund and Take Stock in Children are NOT eligible as their tuition is already paid.* Applicants with Florida Bright Futures scholarships ARE eligible, as are dual enrolled high school students.
- 1.2 The amount granted for each one-year scholarship will be determined by the State Committee but will not exceed \$2,500. A one-time renewal may be awarded.
- 1.3 Notification of award decisions will be made as soon as approval has been received from the P.E.O. Foundation. Email notifications will be sent to all applicants and sponsoring chapters concerning the decisions. **Five** alternate recipients will be selected in the event an award is declined. Alternates will be notified of award only in the event scholarship(s) are declined.
- 1.4 The following are requirements for application:
  - 1.4.1 The applicant must be a woman who is a resident of the State of Florida and a U.S. citizen or legal permanent resident of the U.S. or Canada.
  - 1.4.2 Applicants must meet requirements of scholarship, character, personality, purpose and need. Applicants for the first award year must have high scholastic standing as measured by class rank and standardized test scores, plus a minimum unweighted 3.0 grade point average (GPA) on a 4.0 scale.
  - 1.4.3 The applicant must be accepted or awaiting acceptance for admission to her first year of full-time post-secondary study. Full-time study is defined as 24 annual credit hours at an accredited college or university.
  - 1.4.4 Study must be leading to an Associate or Bachelor degree at a public or private Florida college or university accredited by the Council on Post-secondary Accreditation or the Southern Association of Colleges and Schools.
  - 1.4.5 The applicant must meet with and be sponsored by a Florida P.E.O. chapter. Current application forms must be obtained from a local P.E.O. chapter. Information about contacting a local chapter may be obtained by emailing the Florida P.E.O. Scholarship chairman through the flyer posted on the Florida P.E.O. website ([www.peoflorida.org](http://www.peoflorida.org)).
  - 1.4.6 To apply for the Scholarship, the applicant must return the documents listed in Section 1.5 to the local sponsoring chapter by January 15<sup>th</sup>, prior to her first year of post-secondary study. The chapter will vote to determine if it will sponsor the applicant and then email the completed application materials to the State Chairman of the Florida P.E.O. Scholarship Committee **NO LATER THAN FEBRUARY 15<sup>th</sup>**. Submission of application materials prior to the deadline is highly encouraged.



15<sup>th</sup>, prior to her second year of post-secondary study. The chapter will vote to determine if it will sponsor the applicant and then email (preferred) or mail the completed application materials to the 1Y member of the state committee NO LATER THAN FEBRUARY 15<sup>th</sup>.

- 1.7.4 A Free Application for Federal Student Aide (FAFSA) must be completed. Upon receipt of the Student Aide Report (SAR), submit a copy with the application; or a copy of the parent(s) previous year's tax return.
- 1.7.5 Renewal scholarships are provisionally awarded in July when the applicant meets the following criteria: cumulative GPA 3.0 or above; evidence of fulltime enrollment in the following academic year. The deadline for submission is July 10<sup>th</sup>.

## 1.8 Appendix

- 1.8.1 Application (2 pages)
- 1.8.2 Family Financial Statement (2 pages)
- 1.8.3 Renewal Application





# APPLICATION

Sponsoring Chapter: \_\_\_\_\_

City: \_\_\_\_\_

**Must complete entire application prior to submission**

*Please type or print:*

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

\_\_\_\_\_  
City State Zip

Phone: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_  
(critical for notifications)

\*Father's Full Name: \_\_\_\_\_

\*Mother's Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
City State Zip

\* If applicant is married, please complete above section with information for applicant's spouse. Parent information is applicable only when the applicant is a dependent of one or both parents.

List names and ages of any other dependents of father, mother, and applicant. If dependent is attending a post-secondary institution, give school name.

NAME	AGE	SCHOOL
_____	_____	_____
_____	_____	_____
_____	_____	_____

Unweighted Cumulative GPA \_\_\_\_\_ High School Class Rank: \_\_\_\_\_ out of \_\_\_\_\_

SAT: \_\_\_\_\_ / \_\_\_\_\_ Date Taken: \_\_\_\_\_ ACT: \_\_\_\_\_ Date Taken: \_\_\_\_\_  
Reading & Writing + Math Composite Score

Name of Preferred College/University: \_\_\_\_\_

Address: \_\_\_\_\_

Have you been accepted to the above college/university? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you plan to take a minimum of 12 credit hours of study per semester? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have a Florida Prepaid College Plan? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you plan to accept a Take Stock in Children scholarship? Yes \_\_\_\_\_ No \_\_\_\_\_

Date application fee to the college/university was paid: \_\_\_\_\_

Application, Page 1/2





# FAMILY FINANCIAL STATEMENT

Sponsoring Chapter: \_\_\_\_\_

City: \_\_\_\_\_

Application for Academic Year: \_\_\_\_\_

This form must be sent to the sponsoring chapter along with the student's application and required materials by January 15th. However, for confidentiality purposes, this form may instead be mailed separately, directly to the state scholarship chair. Send *original plus two copies*.

## Section 1: Student's Information

Student's Name: \_\_\_\_\_  
Last First Middle  
Home Address: \_\_\_\_\_  
Street  
City State Zip  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
(critical for notifications)  
Last four digits of SSN: \_\_\_\_\_ or Student ID #: \_\_\_\_\_

## Section 2: Student's Financial Information

Current Year Expected Income (include all money you expect to earn even if you do not expect to file a tax return)

Average hours worked per week \_\_\_\_\_ \$ \_\_\_\_\_  
Social Security Benefits \$ \_\_\_\_\_  
Cash, Savings, Checking Accounts \$ \_\_\_\_\_  
Net worth of investments (include trust funds, money market funds, certificates of deposit, stocks, bonds, and other investments) \$ \_\_\_\_\_

## Section 3: Parents Financial Information\*

Adjusted Gross Income from Federal Tax Return Tax Year \_\_\_\_\_ \$ \_\_\_\_\_  
U.S. Taxes Paid (paid, not withheld) Tax Year \_\_\_\_\_ \$ \_\_\_\_\_  
Annual Gross Income earned from work by father/stepfather \_\_\_\_\_ \$ \_\_\_\_\_  
Occupation \_\_\_\_\_  
Annual Gross Income earned from work by mother/stepmother \_\_\_\_\_ \$ \_\_\_\_\_  
Occupation \_\_\_\_\_  
Earned Income Credit \$ \_\_\_\_\_  
Child Support Received \$ \_\_\_\_\_  
Untaxed Social Security Benefits \$ \_\_\_\_\_  
List Source and Amount of any other Income \_\_\_\_\_ \$ \_\_\_\_\_