



2024 Spirit of a Hero Scholarship Application

The Spirit of a Hero Scholarship Program awards scholarships to deserving graduating high school seniors in Camden County, GA to use towards their post-secondary education. The Kingsland Downtown Development Authority recognizes and celebrates the inspiring work being done by individuals and non-profit organizations across the County to improve the community and the lives of Camden County residents.

This year the Spirit of a Hero Scholarship Program will be giving out two scholarship awards:

- \$500 scholarship award in memory of former Mayor of Kingsland, Mr. Keith Dixon.
- \$500 scholarship award in memory of former Catfish Festival Chairman & dedicated community volunteer, Mr. Jim Doughty.

Eligibility & Selection Criteria for Applicants:

- Must demonstrate a commitment to volunteerism and community contribution.
- Must be a Camden County resident.
- Must be in good academic standing with their secondary school.
- Must be a high school senior receiving a diploma or high school equivalency diploma (GED).
- Must submit a letter of recommendation from a current teacher or advisor.
- Applicants must enroll as a student at an accredited college/university or a vocational training school in the 2024-2025 school year (Fall or Spring Semester). Please include a copy of your acceptance letter from the college/university/vocational school you will be attending.
- Applications must be **typed**, double spaced, with font size 12. Maximum 500-word count per essay.
- Must submit a completed scholarship application form to mail to the address listed below.

Application Process:

- Application Deadline is March 1, 2024.
- The Spirit of a Hero Scholarship is only to be used for post-secondary tuition, fees, or books. The scholarship check will be made payable to the university of the recipient.
- Applicants need only to apply once to be eligible to receive both scholarships.

The completed application form should be mailed to:

Kingsland Downtown Development Authority
Attn: Scholarship Committee
Post Office Box 250
Kingsland, GA 31548

The Scholarship Selection Committee will review and evaluate all scholarship applications and choose the appropriate recipients. Recipients of the scholarships will be notified in May 2024.



Spirit of a Hero Scholarship Application Form

Full Name of Applicant:		
Home Street Address:		
Home City, State, Zip Code:		
Home Phone/ Cell Phone:		
Email Address:		
Birth Date & Age:		
High School Attending:		
High School Address:		
High School Phone #:		
High School Graduation Date:		
Official (sealed) High School transcript:	Attached to Application? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Letter of Recommendation (Teacher or Advisor):	Attached to Application? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Contact Information for Author of Letter (phone or email):		
Attach a list of all community service activities that you have been involved in over the past four years of high School. Please include the dates you participated, locations, and a brief description of each activity (2 sentences max, per activity).	Attached to Application? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<p>The Spirit of a Hero Scholarship program recognizes outstanding individuals in the county who are doing remarkable things to help improve the lives of others and give back to their communities. In that spirit, please describe a volunteer experience you have been involved with in which you made a difference in your community. Maximum 500-word count. Attach additional sheets, if needed.</p>		



Tell us about your future goals and how the scholarship will be used to meet those goals. Please feel free to include significant people and/or events that have influenced you. Maximum 500-word count. Attach additional sheets, if needed.

I affirm that the information provided in this application is true and complete to the best of my knowledge. I understand that if any of the information provided herein is knowingly false and/or inaccurate, I am subject to disqualification and will be ineligible for any award. I consent to the verification of information contained in my application. I understand that if selected, the scholarship check will be made payable to my college institution and will be directly sent to them for deposit into my student account to be applied to tuition, fees, and/or books. I understand if selected that I will need to provide all required information for payment to the Kingsland Downtown Development Authority, otherwise I will forfeit the scholarship.

I hereby agree to those terms.

Signature of Applicant

Date