



**Albany State University  
Scholarship  
Sponsored by: Lowndes-Valdosta Area Alumni Chapter**

Scholarship Amount: \$1,000

Eligibility Criteria:

- Completed application form
- 2024 Graduate
- Admission to Albany State University (fall semester)
- Official high school transcript
- GPA: 2.5 or higher
- Copy of official SAT/ACT Scores
- Submit a double-spaced typed –written essay, minimum of 200 words about your career goals and how you plan to make these goals a reality.
- Three letters of reference

**Scholarship Deadline is March 22, 2024**

**\*Please scan completed application along with essay, transcript, reference letters and email to: [cvhmarable@gmail.com](mailto:cvhmarable@gmail.com) or mail to**

**Valdosta-Lowndes Alumni Chapter of Albany State University, P. O.  
Box 701 Valdosta, GA 31603**

Lowndes-Valdosta Area Alumni Chapter

Albany State University

**PERSONAL DATA**

Name \_\_\_\_\_  
LAST FIRST MI

Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

**PARENTAL INFORMATION**

Father/Guardian \_\_\_\_\_  
LAST NAME FIRST NAME

STREET ADDRESS CITY STATE/ZIP

Phone \_\_\_\_\_

Mother /Guardian \_\_\_\_\_  
LAST NAME FIRST NAME

STREET ADDRESS CITY STATE/ZIP

Phone \_\_\_\_\_

**TO BE COMPLETED BY COUNSELOR**

Current GPA \_\_\_\_\_

\_\_\_\_\_

COUNSELOR'S SIGNATURE

DATE

**Achievements, Awards, Extracurricular Activities and Talents**

**(Information should be relative to high school years of enrollment) Additional information should be attached to this form.**

List any honors or awards you have received:

---

---

---

---

List organizations and offices held:

---

---

---

Church and Community activities and offices held:

---

---

---

**I affirm that the information included with my application is true and accurate in all aspects and that I intend to pursue a degree in higher education.**

---

Student Signature

---

Date