



## FCCFA Scholarship Application



*Scholarships donated by Funeral Services, Inc., Service Corporation International and FCCFA Members*

The Florida Cemetery, Cremation and Funeral Association (FCCFA) receives multiple donations each year for scholarships. A minimum of \$3,000 will be given each year, *if there are qualified applicants*. Depending on funding from members, there could be additional funds to award over the \$3,000. The following are sponsors of the FCCFA scholarship funds:

- Funeral Services, Inc. (FSI) has established a scholarship fund in the name of Doug Stowell and will award one scholarship per year at \$1,000.
- Service Corporation, Inc. (SCI) has established a scholarship fund and will award two scholarships per year at \$1,000 each (totaling \$2,000).

### **Scholarship Award Application**

The FCCFA is committed to excellence in death care service education. This scholarship award program has been established to support that commitment by providing scholarship funds that are awarded to qualified students of Mortuary Science Programs in an accredited Mortuary Science school who plan to serve the profession in the State of Florida.

All scholarships will be awarded at the discretion of the Scholarship Committee of the FCCFA. Awards will be based on application information, academic record, and the evaluation of the required essays. The decision of the scholarship committee will be final. The committee reserves the right not to award funds if there are no applicants or if the applicants do not meet the standards of the committee. **The deadline for applications must be submitted by April 30.** The awards will be announced in May prior to the FCCFA Annual Convention & Trade Show and a presentation will be made during the Convention honoring the award recipients.

Notification of the award will be mailed to the student. The scholarship funds will be mailed directly to the school the student is currently enrolled. The funds are to be used for student tuition, books, and /or lab fees as deemed necessary for the continuation of the mortuary science program. The denominations to be awarded each year will be decided annually by the FCCFA Scholarship Committee and approved by the Board of Directors.

### **Eligibility Criteria**

1. The applicant must have an overall GPA of 2.5 or higher.
2. The applicant must be currently enrolled at the time of the application AND will be enrolled for the following semester.
3. The applicant must be a legal resident of the State of Florida. (Acceptable proof of legal Florida residency includes voter registration card, driver's license, Florida Resident ID.)
4. All applicants must be a student member or an employee of an FCCFA firm member (funeral home, crematory or cemetery) for at least one (1) year.
5. The applicant must submit the following to the FCCFA office by **April 30**. Email applications as a PDF attachment to [info@thefccfa.com](mailto:info@thefccfa.com)
  - Typed completed application
  - Current college transcript or letter stating GPA from the Program Chairman
  - Two (2) proofs of Florida residency
  - One (1) typed five hundred word essay

### **Essay**

**“Choosing Your Career”:** Describe the process you used and the experiences you underwent in your decision to enter the death care service profession and give your perception of the value of the industry. Also, tell the Scholarship Committee about yourself and why you will make a great death care service professional.

# FCCFA Scholarship Application – DEADLINE IS APRIL 30

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

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

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Employer: \_\_\_\_\_

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

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

Immediate Supervisor: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ How long have you worked there? \_\_\_\_\_

Previous Employer: \_\_\_\_\_

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

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

Immediate Supervisor: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ How long did you work there? \_\_\_\_\_

## College or University

Circle year completed: 1 2 3 4 5 6 7 Degree received?  Yes  No Date degree received: \_\_\_\_\_

Name of Degree: \_\_\_\_\_

Name of School: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

## Mortuary Science Education

Name of school you are attending: \_\_\_\_\_

Date started: \_\_\_\_\_ How many credit hours have you completed? \_\_\_\_\_

Anticipated completion date: \_\_\_\_\_ Student #: \_\_\_\_\_

## Personal Reference

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_

## Professional Reference

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_

I am a legal resident of Florida and have resided in Florida for a minimum of twelve (12) months. I certify that to the best of my knowledge the information contained in this application is correct and complete. It is my intention to continue my mortuary science education and to enter the field of funeral service in the State of Florida upon successful completion of professional education, examination, and licensure.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_