



Y.O.U.T.H. Friendship Foundation Inc. Annual Scholarship Awards Application



Instructions for completion of application

1. All blanks must be filled in. If information is not applicable, write N/A in the blank.
2. Application must be signed and dated.
3. Information must be completed and accurate.
4. Applicants should be prepared to verify family income and other financial aid upon request.

APPLICANT'S INFORMATION

Applicant's Name _____ Date _____

Date of Birth _____ Are you an American Citizen? Yes _____ No _____

Home Address _____ Zip Code _____
Street Number and Name City, State, and County

Phone Number _____ Email _____

PARENT OR GUARDIAN INFORMATION

Parent or Guardian Name and Address:

Father _____

Mother _____

Guardian _____

Parent or Guardian Occupation and Annual Income:

Father _____ \$ _____

Mother _____ \$ _____

Guardian _____ \$ _____

Number of school-age children in home _____

Please list financial aid other than family support which you will be receiving. Examples – Scholarships, Grants, etc.



In which extracurricular activities and community affairs have you been active with since high school?

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APPLICANT CAREER STATEMENT

**What are your career objectives and future aspirations?
Please ensure your responses do not exceed 300 words.**



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APPLICANT SIGNATURE PAGE

Applicant Name _____

Proposed Graduate Department or Program _____

Major/Degree _____

I agree that the recommendation I am requesting shall be held in confidence by the Board of Directors of the Y.O.U.T.H. Friendship Foundation, Inc., and hereby waive any rights I may have to examine it.

Yes _____ No _____

Signature of Applicant _____

Date _____

MAIL TO:
Board of Directors
Y.O.U.T.H. Friendship Foundation, Inc.
P.O. Box 1364
Madison, AL 35758



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Please provide this page to your High School Counselor or Administrator

Attn: High School Counselor or Administrator

The student named below has applied for a Scholarship from the Y.O.U.T.H Friendship Foundation, Inc. Please assist us in making our selection by providing the information below by the designated deadline. In addition, we would appreciate any comments that you consider appropriate in the space provided below.

Name of Applicant _____

College Accepted _____

College Address _____ Zip Code _____

Please check one:

What is the applicant's individual rank (exact or approximate) in his or her class?

Upper 5%

Upper 10%

Upper 25%

N/A

How would you rank the applicant's chances for scholastic success at a higher learning institution?

Excellent

Good

Fair

Additional Comments:

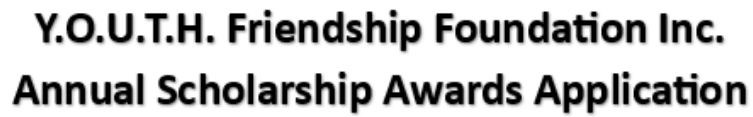
Signature _____

Position/Title _____

The High School Counselor or Administrator must mail this page and official transcript to the address below for the students' application to be complete.

MUST BE RECEIVED AND POSTMARKED BEFORE MARCH 16th

MAIL TO:
Board of Directors
Y.O.U.T.H. Friendship Foundation, Inc.
P.O. Box 1364
Madison, AL 35758



Please provide three letters of recommendation to be submitted with this packet. Two letters must be from individuals who have no family ties, and the third letter must be from a high school counselor or administrator. The recommender can use this page and complete in the space below, or a letter can be typed.

We would appreciate your assessment of the applicants in the following areas:
 Personality, Character, Professionalism, how long and what capacity have you known the
 applicant, known scholarships, and assessment of strengths/weaknesses. Please complete the
 space below, or a letter can be typed.

TO BE COMPLETED BY THE RECOMMENDER:

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Recommender Name

Position Title	Work Number
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Signature



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Items to Remember

- Ensure to mail Pages 1-4 for a complete application packet. In spaces that are not applicable, please write N/A. It is important to make sure your application is signed on page 4.
- Three recommendation letters must be provided in your packet. Two recommenders should be from someone who has no family ties. The third recommender should be a high school counselor, administrator, or teacher.
- If the recommender typed a recommendation letter, ensure it is included in packet.
- Remind your High School Counselor or Administrator to complete page 5 and mail to the address listed along with your official transcript. This must be received and postmarked **NLT March 16, 2026**.
- The deadline for submission of the scholarship packet and all documentation must be postmarked **NLT March 16th, 2026**.
- If awarded a scholarship, it will be credited to the student account when the student is admitted to a college or university.

MAIL TO:

**Board of Directors
Y.O.U.T.H. Friendship Foundation, Inc.
P.O. Box 1364
Madison, AL 35758**

**Should you have questions please email Mr. Patrick Buford
patbee35@gmail.com**