

Maryland House of Delegates Scholarship Application
Delegate Neil Parrott – District 2A
2021-2022 Academic Year

1. Basic Information *(Please Print):*

Title: _____ First Name: _____ Middle Initial: _____ Last Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Social Security Number: _____
Needed for tax purposes

Date of Birth ____/____/____ Email Address: _____

Are you a current resident of Legislative District 2A? Yes ____ No ____

2. Education: *Please print the name of the school/university you are currently attending or most recently attended.*

Name of Institution: _____

Address: _____

City: _____ State: _____ Zip: _____

Year(s) Attended: _____ Degree obtained, if any: _____

GPA: _____ Number of Credits Completed: _____

3. Additional Information: *(Please print)*

School Activities: _____

Community Activities: _____

Honors, Awards, Etc: _____

Work History: _____

4. Specific Information:

I am a United States citizen and a legal resident of Maryland and would like to be considered for a Maryland House of Delegates Scholarship to:

(Must be a college/university within the State of Maryland. Exceptions only for majors not offered in this State.)

Major/Field of Study: _____

Level of education you are pursuing? *(Please note this is an undergraduate program only)*

Freshman ___ Sophomore ___ Junior ___ Senior ____

Are you a new applicant to the Maryland House of Delegates Scholarship Program? _____

Do you currently have any scholarships? _____ *If Yes, please list:* _____

What is the approximate yearly cost of your education?

Tuition: \$ _____ Books/Fees: \$ _____

Room/Board: \$ _____ Other Expenses: \$ _____

Additional comments or information which will help the Scholarship Committee in their consideration of your application: _____

5. Additional Requirements:

To help us identify the best candidates for this scholarship, please include the following information with your application:

- 1) Phone numbers and addresses of two references.
- 2) Copy of Academic Transcript(s).

Part II – Applicant’s Essay

Please see the next page for details on the essay assignment.

I have enclosed all of the necessary information as stated in this application.

With my signature, I attest that the information stated in this application is true and correct to the best of my knowledge, and that my essay was self-written and not plagiarized. I also attest that I am a legal resident of the State of Maryland, Legislative District 2A.

Signature of Student Applicant Date

Signature of Parent/Guardian (if applicable) Date

Applications must be postmarked on or before June 30, 2021, and mailed to the following address:

Delegate Neil C. Parrott, P.E.
P.O. Box 32
Funkstown, MD 21734

Scholarship decisions will be mailed to all applicants on or before July 31, 2021.

The information provided is only for the use of the Scholarship Committee and Delegate Neil Parrott. All information will be kept confidential.