

THE GREATER BRIDGEPORT BOARD OF REALTORS® INC.

2025 Scholastic Achievement Program

TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES

Completeness, including the Unusual Circumstances and the Goals and Aspirations sections is required.

Neatness ensures your application will be reviewed properly.

- **Criteria:**
 - These awards are available to any child/stepchild/grandchild/guardian of an active GBBR member (in good standing for at least one year prior to application).
 - An applicant must be a high school graduating senior entering an accredited college/vocational-technical school full time or a full time College/Vocational Technical/Graduate Student and have at least 1 more year left of school.
 - The applicant must have at least a 3.0 GPA or better. These awards are not available to any past recipient.

Application postmark deadline Friday May 23, 2025

FOR SCHOLASTIC COMMITTEE USE ONLY

RIC/CS _____

GPA _____

SAT SCORE _____

ACT SCORE _____

APPLICANT

Last Name _____ First _____ Middle Initial _____

Address _____ City _____ ST _____ Zip _____

Telephone () _____ E-mail Address _____

Date of Birth _____

APPLICANT CATEGORY

Check one box only.

I am ☐ the son/daughter of a current member of the G.B.B.R.

☐ the grandson/granddaughter of a current member of the G.B.B.R.

Name of REALTOR Mother/Father/Grandparent /Guardian

Full Name _____

Office _____

PARENT OR GUARDIAN INFORMATION

Father's Name _____ Occupation _____

Mother's Name _____ Occupation _____

Address _____

City _____ State _____ Zip Code _____

Are there any siblings now enrolled in college? _____ Graduation Date _____

If yes, name of college(s) _____

Are they receiving financial assistance? _____

HIGH SCHOOL DATA

School Name _____ H.S. Graduation Date: Month/ Year _____
City _____ State _____ Telephone (____) _____

POST SECONDARY SCHOOL DATA

Name of post-secondary school you plan to or are attending. **(Please provide a copy of Acceptance Notice)** Use official school names. Do not use abbreviations.

_____ City _____ State _____

_____ City _____ State _____

☐ 4yr College or University

☐ 2 yr Community or Junior College

☐ Vocational-Technical School

☐ Other, Explain _____

Year in school **next** year _____

Expected college graduation date: Mo/Yr _____

Major or course of study _____

Degree sought:

☐ Bachelor

☐ Associate

☐ Certificate

☐ Other

If space provided in any section is inadequate, you may continue on additional sheets of paper using the same format. **DO NOT** repeat information already reported on the application form. Your name, address and name of this scholastic program should be included on all attachments.

UNUSUAL CIRCUMSTANCES (required) Please describe, in at least 250 words, how and when any unusual family or personal circumstances have affected your achievement in school, work experience, or your participation in school and community activities.

WORK EXPERIENCE

Describe your work experience during the **past four years** (e.g., food server, babysitting, lawn mowing, office work). Indicate dates of employment for each job and approximate **number of hours worked** each week. List amounts earned at each job

Employer/Position	From-Mo/Yr	To-Mo/Yr	Hours per week	Amount Earned

ACTIVITIES, AWARDS AND HONORS

List all school activities in which you have participated during the past four years (e.g. student government, music, sports, etc). List all community activities in which you have participated without pay during the past four years (e.g., Boy/Girl scouts, hospital volunteer, Special Olympics).

Activity	No. of Yrs.	Special Awards, Honors	Offices Held	Activity	No. of Yrs	Special Awards, Honors	Offices Held

GOALS AND ASPIRATIONS (required)

Make a brief statement or summary of your plans as they relate to your educational and career objectives and long-term goals

PLEASE LIST THE NAME AND DOLLAR AMOUNT OF ANY GRANTS OR SCHOLARSHIPS YOU ARE RECEIVING THIS YEAR.

HOW DO YOU PLAN TO PROVIDE FOR YOUR NEXT YEAR OF COLLEGE EXPENSES?

APPLICANT APPRAISAL (REQUIRED)

To the Applicant: This section is required and must be completed in the format provided. If incomplete, your application will not be evaluated. The section is to be completed by a high school counselor, an instructor, or work supervisor who knows you well.

To the Adult Appraiser: You have been asked to provide information in support of this application. Please give immediate and serious attention to the following statements. When complete, please return to applicant. If you prefer, photocopy this section and return to applicant in a sealed envelope. A letter of recommendation does not replace this section.

The applicant's choice of post-secondary educational program is ☐ extremely appropriate ☐ very appropriate ☐ moderately appropriate ☐ inappropriate

The applicant's achievements reflect his/her ability ☐ extremely well ☐ very well ☐ moderately well ☐ not well

The applicant's ability to set realistic and attainable goals is ☐ excellent ☐ good ☐ fair ☐ poor

The quality of the applicant's commitment to school and/or community is ☐ excellent ☐ good ☐ fair ☐ poor

The applicant demonstrates curiosity and initiative ☐ extremely well ☐ very well ☐ moderately well ☐ not well

The applicant is able to seek, find and use learning resources. ☐ extremely well ☐ very well ☐ moderately well ☐ not well

The applicant demonstrates good problem-solving skills, follows through, and completes tasks ☐ extremely well ☐ very well ☐ moderately well ☐ not well

The applicant's respect for self and others is ☐ excellent ☐ good ☐ fair ☐ poor

Comments: _____

Appraiser's Name _____ Title _____

Telephone (____) _____

Signature _____ Organization _____ Date _____

TRANSCRIPT INFORMATION

An official transcript of grades **must** be sent with all applications. On-line transcripts and grade reports are not acceptable.

All high school applicants **must** include a high school transcript of grades and have this section completed by the appropriate school official. (A clear explanation of the school's grading scale must also be submitted.)

<u>Class Ranking</u> Applicant ranks _____ In a class of _____
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<u>Cumulative Grade Point Average</u> Weighted: _____ /4.0 scale Unweighted: _____ /4.0 scale

<u>SATs</u> Math _____ Reading / Writing _____

School Official's
Signature _____ Date _____ Title _____ Telephone (____) _____

Schools Official's
Address _____ City _____ State _____ Zip _____

APPLICATION CHECK LIST

The student is responsible for submitting all materials to The GBBR Scholastic Achievement committee on time. Incomplete applications will not be evaluated. This application becomes complete and valid only when the committee has received all of the following materials:

- ☐ Student Application with completed Applicant Appraisal
- ☐ Current completed Transcript(s) of Grades
(Including grading scale)
On-line transcripts are not acceptable.

All materials, including transcript, must be addressed to:

**The Greater Bridgeport Board of REALTORS
Scholastic Achievement Program
843 White Plains Road
Trumbull, CT 06611**

Postmark deadline Friday May 23, 2025

CERTIFICATION

The GBBR Scholarship Committee has the sole responsibility for selecting recipients based on criteria as set forth in the application and instructions. This application becomes the property of the GBBR. (It is recommended that you keep a copy for your files)

I acknowledge decisions of The GBBR are final. I certify that I meet the basic eligibility requirements of the program as described in the instructions and that the information provided is complete and accurate to the best of my knowledge. If requested, I agree to provide proof of information I have given on this form. Falsification of information may result in termination of any scholarship granted.

Applicant's Signature _____ Date _____

Parent's Signature _____ Date _____