

Everett & Trudy Suddreth  
*Scholarships of Excellence*

The *Carolinas Food Industry Council (CFIC)* is proud to offer employees of its member companies the opportunity to apply to win a \$2,500 Everett & Trudy Suddreth Scholarship of Excellence Award. Funded by the Council's charitable foundation, the Retail Consumer Alliance (RCA), this scholarship is awarded annually to a total of 40 deserving students.

## Twenty \$2,500 College Scholarships Available for High School Seniors!



### Who Is Eligible...

- A spouse or dependent of a permanent, full-time employee of a CFIC Retail, Wholesale or Supplier Member Company. *(Employee must be employed for at least one year as of 1/1/18.)*
- Any student who at a minimum is a part-time employee of a CFIC Retail, Wholesale or Supplier Member Company. *(Student must be employed for at least six months as of 1/1/18.)*

*NOTE: The food industry employee (whether a parent or student) must work at a CFIC Member Company location in North or South Carolina, and must be employed at the time the winners are selected. Qualified scholarship recipients may attend a college located in any state.*

### Who May Apply...

- High School Seniors enrolling for the 2018 fall semester as College Freshmen and College Undergraduates enrolling for the 2018 fall semester.
- Students who have previously received a CFIC scholarship are eligible to apply again.

*NOTE: Extra credit will be given to students who are currently employed in the grocery industry and/or students who are enrolled in a food industry undergraduate curriculum (i.e. Culinary Arts).*

### How To Apply...

Visit our website at [www.retailpaysforcollege.org](http://www.retailpaysforcollege.org) or [www.cficweb.org](http://www.cficweb.org) to print a copy of the application. If you need an application mailed please call (919) 832-0811.

Mail completed application and official transcript to **CFIC, Attn: Scholarship, PO Box 1030, Raleigh, NC 27602.**

### Deadline...

Completed applications and official transcripts must be post-marked by Monday, **March 26, 2018.**

### Selection of Winners...

- Scholarship winners will be selected by an independent panel of educators.
- All applicants will be notified via e-mail in June.
- Winners must be enrolled in college full-time for the 2018 fall semester.



Questions? Contact Sarah Cribb at (919) 832-0811 or via e-mail [sarahe@ncrma.org](mailto:sarahe@ncrma.org)

*The Retail Consumer Alliance (RCA) was organized in 2008 to foster stronger community partnerships between consumers and the retail industry. We do this by funding an annual educational scholarship program and making an annual contribution to the Feeding America Food Banks for North and South Carolina.*

*Eligibility for the scholarship program is limited to students who have worked for a minimum of six months for a CFIC member company or to students whose parents have worked a minimum of one year for a CFIC member company. The applications are forwarded to an Academic Scholarship Evaluator, and based on objective, measurable point-based criteria established by the RCA Board.*

*Applicants agree that scholarship funds are to be used solely for educational purposes and for that reason made payable to the educational institution. In the event the applicant does not attend an educational institution in the school year for which scholarship funds were to be awarded or for a partial school year, the scholarship applicant acknowledges that they have no property or vested rights in said scholarship funds, that the Retail Consumer Alliance Foundation, Inc. maintains all rights to these funds and that said funds shall be returned to the Retail Consumer Alliance Foundation, Inc. by the educational*

Completed by Student

Type or Print Legibly  
 (blue or black ink only)

Incomplete Applications will be rejected

Mr./Ms.: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Permanent Mailing Address: \_\_\_\_\_

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

\*E-mail: \_\_\_\_\_

*\*This e-mail address will be the one used to notify you by June 2018. Be sure to print legibly.*

**Eligibility/Work History** My eligibility to apply for this scholarship is based on the employment of:

- Parent or guardian (**Complete A only**)    Myself (**Complete B only**)    Both: Parent & Myself (**Complete Both A & B**)

**A. Parent or Guardian Employment Information:**

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

Name of CFIC member company that parent works for:  
 \_\_\_\_\_

Company is located in: City: \_\_\_\_\_ State: \_\_\_\_\_  
*(Store or company must be located in North or South Carolina)*

Company Phone #: \_\_\_\_\_

Employment began at this company on: \_\_\_\_\_  
*(Must be employed at least one year as of 1/1/18 and at the time scholarship is awarded; employment will be verified.)*

**B. Student Employment Information:**

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

Name of CFIC member company that student works for:  
 \_\_\_\_\_

Company is located in: City: \_\_\_\_\_ State: \_\_\_\_\_  
*(Store or company must be located in North or South Carolina)*

Company Phone #: \_\_\_\_\_

Employment began at this company on: \_\_\_\_\_  
*(Must be employed at least six months as of 1/1/18 and at the time scholarship is awarded; employment will be verified.)*

Average number of hours student works per week: \_\_\_\_\_

**Completed by Student** *(List additional information on a separate sheet of paper.)*

Describe any additional part-time jobs you have held during the school years. **Include average weekly hours worked.**

\_\_\_\_\_

\_\_\_\_\_

Describe how you were involved in high school activities such as class or school offices, band or orchestra, athletics, dramatics, debate or oratory, school publications, pep club, etc. In the right-hand column, designate by number the high school year in which you participated in each activity as follows: 1-Freshman 2-Sophomore 3-Junior 4-Senior.

Activity	Position Held	Hours per Week	Year of Participation

**CFIC Office Use Only:** Date Application Received: \_\_\_\_\_ Date Official Transcript Received: \_\_\_\_\_

\_\_\_\_\_   
 Last Name, First Name

*(List any additional information on a separate sheet.)*

List any special recognition have you received for outstanding schoolwork, extra-curriculars or community service, such as honors, prizes or scholarships.

Recognition	Year Received	Recognition	Year Received

Describe your involvement in community service or activities outside of school, such as Boy or Girl Scouts, 4-H Club, recreational or club sports, church organizations, volunteering etc.

Activity	Year(s) of Participation	Activity	Year(s) of Participation

In the fall 2018 semester, I plan to attend \_\_\_\_\_  
 College, University or Vocational Tech School

with a major in \_\_\_\_\_ .  
 (optional)

List all schools attended from 9<sup>th</sup>-12<sup>th</sup> grades.

Name of High School	City and State	Attendance Dates

\_\_\_\_\_   
 Last Name, First Name

## Student's Release of Records

To comply with the provisions of the *Family Educational Rights and Privacy Act of 1974*, permission is hereby given to school officials to release the secondary school record and other requested information for consideration in this scholarship program.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature (if student is under 18): \_\_\_\_\_ Date: \_\_\_\_\_

\*E-mail: \_\_\_\_\_

*\*This e-mail address will be the one used to notify you by June 2018. Be sure to print legibly.*

I certify that all of the information contained in this application is correct to the best of my knowledge.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Completed by Guidance Counselor

- Enclosed is a copy of the student's fall 2017 transcript and SAT or ACT scores (if applicable).
- Completed the information on right.
- Signed certification statement below.
- Mailed to: CFIC, Attn: Scholarship, PO Box 1030, Raleigh, NC 27602.

*I certify that all the information on this form is accurate and that the student's records have been included with the 3-page application.*

\_\_\_\_\_  
 Counselor's Signature

\_\_\_\_\_  
 Counselor's Name (PRINT)

\_\_\_\_\_  
 Counselor's Office Phone Number:

\_\_\_\_\_  
 Counselor's E-mail Address:

<b>High School Type:</b> <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Special or Magnet <input type="checkbox"/> Home School	
GPA <i>unweighted</i> <small>(do <b>not</b> list weighted)</small>	
SAT Critical Reading Scores <small>(not %)</small>	
SAT Math Scores <small>(not %)</small>	
SAT Writing Scores <small>(not %)</small>	
ACT Scores <small>(comp)</small>	

### Check Box for Student to Ensure Accurate Completion

- Completed and signed student section of application in its entirety. Incomplete applications will be rejected.
- Delivered page 3 of application to Guidance Counselor for counselor to complete.
- You will be enrolled in college as a full-time student for the 2018 fall semester.
- Mailed completed application and official transcript to CFIC.

Mail application and official transcript to:

**CFIC, Attn: Scholarship**  
**PO Box 1030, Raleigh NC 27602**

Postmarked by:  
**March 26, 2018**