2027 GUIDELINES FOR PEARL SPARKS HEALTHCARE SCHOLARSHIP

AWARDED BY ALABAMA DISTRICT, PILOT INTERNATIONAL

1. The scholarship shall be awarded biannually to a qualified student who has been accepted by an approved school offering a program with a degree in a medical or health related field in the state of Alabama.
2. The scholarship shall be $1600.00 payable $800.00 per year for two years only.
3. Should the recipient not remain in school, the balance from the scholarship account shall be returned to the Alabama District Treasury.
4. The completed application form must be accompanied by:
   A. A high school transcript, and college transcript if already enrolled.
   B. A letter from the applicant to include the reason for entering their medical related field and why he/she should receive the scholarship.
   C. A letter of acceptance from the school offering a program in their chosen medical field, in Alabama.
   D. Two letters from academic references (teachers, principals, etc.) who could recommend applicants.
   E. Summary and verification of Volunteer and Community Service Activities and Hours.
5. Applications must be signed by the sponsoring Pilot Club President, which is in good standing in the Alabama District of Pilot International.
6. **Three (3) copies of the application and all attachments must be submitted, one to the Committee Chair, one to the District Governor, and one to the Treasurer listed below. This should be done in two ways. First a hard copy by mail and a second copy via email, no later than 20 February 2027** (I suggest postmarking by February 14th) This is a precaution that will ensure that your application reaches its intended destination. Also, I recommend using a large 9 X 12" mailing envelope.
7. Judges will be the Pearl Sparks Scholarship Committee, consisting of 3 impartial members appointed by the Alabama District Administrative Council.
8. The Scholarship Recipient will be notified prior to and be announced at the Alabama District Convention in May.
9. The Pearl Sparks Committee Chair will notify all other nominees in writing of the judge's decision.
10. The **Scholarship Recipient** shall be responsible for *verifying that the school officials notify and provide proof of registration and acceptance to the Alabama District Governor before the funds will be distributed to the school.*
11. The **Scholarship Recipient** is required to have the school officials send to the Alabama District Governor verification that the recipient is in good standing, **before funds for the 2nd year** will be distributed to the school.
12. Applicants will be judged based upon all supplied information including academic record and financial need.

FOR ADDITIONAL INFORMATION CONTACT:
Beverly Kissinger, Pearl Sparks Scholarship Committee
Phone: 540-327-8461
Email: b.a.kissing415@gmail.com or
bkissing@retiree.ua.edu

A copy of COMPLETED APPLICATION SHOULD BE MAILED and EMAILED to each of the 3 people below:

Beverly A Kissinger, Chairman
Pearl Sparks Scholarship Committee
2114 Fox Ridge Road
Tuscaloosa, AL 35406
and via email
bkissing@retiree.ua.edu
Text any questions to 540.327.8461

Carolyn K. Williams, Governor
Alabama District, Pilot International
2619 Gawain Road
Huntsville, AL 35803
ecw720@comcast.net

Kay Chandler, Treasurer
Alabama District, Pilot International
104 Jackson Way
Decatur, AL 35603
misskay311@aol.com

Note: The Chairman will forward via email the applications as a group to the committee members. It is advised that applicants scan and send documents as a PDF. The professional quality of your application packet matters to the impression you give. Be consistent with any written documents you personally create and keep them in portrait orientation like the application. School records of your courses and grades may vary and be landscape or a mixture of both types of orientation which is fine.

2027 APPLICATION FOR PEARL SPARKS HEALTHCARE SCHOLARSHIP
AWARDED BY ALABAMA DISTRICT, PILOT INTERNATIONAL

NAME: _____ DOB: _____ SEX: _____

MAILING ADDRESS: _____

_____

EMAIL: _____

TELEPHONE: CELL_____ HOME_____

NAME OF HIGH SCHOOL ATTENDED: _____

MAILING ADDRESS: _____

DATE OF GRADUATION: _____ GRADE POINT AVERAGE: _____ **(Attach Transcript)**

NAME OF COLLEGE ATTENDED: _____

MAILING ADDRESS: _____

GRADE POINT AVERAGE: _____ **(Attach Transcript)**

OTHER SCHOLARSHIP/AMOUNTS RECEIVED OR APPLIED FOR:

_____

_____

WORK EXPERIENCE: _____

_____

NAME & ADDRESS OF SCHOOL WHERE YOU HAVE BEEN ACCEPTED **(Attach Proof of Acceptance)**

_____

ARE YOU A RESIDENT OF ALABAMA? YES: ___ NO: ___

NAME OF PARENT, GUARDIAN OR SPOUSE: _____

FAMILY INCOME: ___$6,000-$10,000; ___$10,000-$15,000; ___$15,000-$25,000; ___ABOVE $25,000

OCCUPATION OF FATHER, MOTHER OR SPOUSE: _____

APPLICANT'S SIGNATURE: _____ DATE: _____

NAME OF SPONSORING PILOT CLUB: _____

SIGNATURE OF SPONSORING PILOT CLUB PRESIDENT: _____

See Scholarship Guidelines for other required supporting documentation.

APPLICATION DEADLINE IS 20 February 2027 (Suggest postmark by February 10)

COMPLETED APPLICATIONS SHOULD BE **MAILED & EMAILED** TO:

Beverly Kissinger, Chairman Pearl Sparks Scholarship Comm. 2114 Fox Ridge Road Tuscaloosa, Al 35406	Carolyn Williams, District Governor 2619 Gawain Road Huntsville, AL 35803 ecw720@comcast.net	Kay Chandler, Treasurer 104 Jackson Way Decatur, AL 35603 Misskay311@aol.com