



The Louise Spruill Scholarship

Awarded by the Heritage Quilters Giving Circle, Inc.

AWARD AMOUNT: \$500.00 (one-time)

QUALIFICATIONS

- Applicant must attend one of the following schools in Vance or Warren County, North Carolina:

Advance Academy
Vance Early College High School
Vance County High School

Warren Early College High School
Warren County High School

- Applicant must be a graduating high school senior interested in attending college (community college, two-year college, or a four-year college or university)
- Applicant can pursue any field of study

GUIDELINES

Complete and email the application and other required documents to your school counselor or to the Heritage Quilters Scholarship Coordinator, **Margaret Bullock** at mw_bullock@hotmail.com with the subject line: **SCHOLARSHIP**.

DEADLINE: Monday, July 7, 2025

Good Luck!



THE LOUISE SPRUILL SCHOLARSHIP APPLICATION

NAME _____ DOB _____

HOME ADDRESS _____

CITY/TOWN _____ STATE _____ ZIP CODE _____

TELEPHONE _____ COUNTY _____

EMAIL ADDRESS _____

MOTHER/GUARDIAN (Name/Occupation) _____

FATHER/GUARDIAN (Name/Occupation) _____

OF PEOPLE IN HOUSEHOLD _____

ANNUAL FAMILY INCOME (Check one)

☐ < \$10,000

☐ \$30,000 - \$39,999

☐ \$10,001 - \$19,999

☐ \$40,000 - \$49,999

☐ \$20,000- \$29,999

☐ \$50,000 +

HIGH SCHOOL _____ GPA _____

INTENDED COLLEGE/UNIVERSITY _____ ACCEPTED Y/N

COST OF COLLEGE TUITION & FEES (year) _____

HONORS/AWARDS

SCHOOL/CHURCH/COMMUNITY ACTIVITIES

CAREER OBJECTIVES



REFERENCES

Attach two (2) letters of reference from adults who know you well, e.g. teacher, counselor, minister, or employer.

ESSAY

Write a one (1) page, typed essay on the following question:

What do you see as an important need in your community
and what might you do to address that need?

Please attach the essay to your application and return documents to either your school counselor or Margaret Bullock at: mw_bullock@hotmail.com by **Monday, July 7, 2025**.

I hereby certify that the above statements are true and correct to the best of my knowledge. I understand that a false statement may disqualify me for this scholarship.

APPLICANT'S SIGNATURE

DATE

_____ **DO NOT WRITE BELOW THIS LINE** _____

Scholarship Chairperson Signature: _____ Date _____

Heritage Quilters Coordinator Signature: _____ Date _____

Completed Application (Y/N) References (Y/N) Essay (Y/N) Date Received _____