



2000 Wildcat Drive El Dorado, AR 71730 870-864-5128

Application for the El Dorado Promise Scholarship

Complete this form in entirety to request funding from the El Dorado Promise scholarship plan.
Please print clearly. See page two for complete instructions on completing this form.

Student: _____ **Date:** _____

Social Security Number: _____

Address: _____ **City / State / ZIP:** _____

Phone #: _____ **Alternate Phone #:** _____

E-mail Address: _____

The following is my qualification information:

Grade at which **continuous** El Dorado Public School (EPS) enrollment started: _____

This is the date which I expect to graduate from El Dorado High School: _____

The schools listed below are the schools that I am considering for enrollment and use of the El Dorado Promise Scholarship. (List your choices in order of preference; you are only required to list one.)

School 1: _____

School 2: _____

School 3: _____

My signature below indicates that I have read and understand the terms of this scholarship and the information I have provided above concerning residency and enrollment in the El Dorado Public School district is true to the best of my knowledge.

Student (student must sign): _____

Parent / Guardian: _____

(if under 18)

Address: _____

(if different than above)

City / State / ZIP: _____

Phone Number: _____ E-mail Address: _____



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Application instructions:

1. Fill in the information on your name, address, social security number (required for tax purposes), phone, and e-mail.
2. Fill in the grade at which your continuous El Dorado Public School (EPS) enrollment and residency began.
 - a. Enrollment must have started on the first day of school for that grade.
 - b. Enrollment must have been in an EPS district school.
 - c. See the website (www.eldoradopromise.com) for clarification on this requirement, under frequently asked questions (FAQ) or your school counselor for a paper copy of the same.
3. Fill in your expected high school graduation date.
4. State college or university(s) to which you have applied or plan to apply. List your choices in order of preference; you are only required to list one. Institutions selected must be accredited by one of the following regional accrediting bodies:
 - a. Middle States Commission of Higher Education
 - b. New England Association of Schools and Colleges - Commission of Institutions of Higher Education
 - c. North Central Association of Colleges and Schools - The Higher Learning Commission
 - d. Northwest Commission on Colleges and Universities
 - e. Southern Association of Colleges and Schools Commission on Colleges
 - f. Western Association of Schools and Colleges
5. Sign the form. If you are not at least 18 years of age, your parent or guardian must ALSO sign and provide their contact information if different from yours. **All students must sign.**
6. If you have any questions please refer to the website (www.eldoradopromise.com). There you will find the answers to most questions. The high school counselors can also provide copies of information found on the website. You may also call the Promise Office at 870-864-5128.
7. Applications may be submitted to your high school counseling office, to the El Dorado Promise Director at the High School or mail completed application to:
El Dorado Promise Program Administrator
2000 Wildcat Drive
El Dorado, AR 71730