FAMILY PLAN INC.

KERRI KIKER MEMORIAL SCHOLARSHIP

2024 APPLICATION

This scholarship is in memory of Kerri L. Kiker. In her memory, we are selecting individuals who have a deep drive and desire to better themselves. This scholarship is not based on GPA, SAT, and Class Rank alone. We are targeting students based on need or perhaps have extenuating circumstances. Kerri was a highly motivated girl who overcame obstacles on the way to reaching her dream.

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	ing Address: ne Number:				
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LIST	THE FOLLOWI	NG:			
A.	Your High School				
B.	Your Grade Point Average (weighted) (unweighted)				
C.		d SAT or ACT Score			
D.	Your Class Ran	1k			
ANS	WER THE FOLL	OWING WITH A BR	IEF STATEMENT:		
I.	Where do you	plan to attend college,	vocational or technical s	chool?	
II.	Have you been accepted to any of the above institutions?				
III.	What is your intended course of study?				
IV.	What is your fi	nat is your financial need?			
V.	What other sch	cholarships are you applying for or expected to receive?			
VI.	List your extra	-curricular activities an	d/or honors you have pa	rticipated in or won.	

VII.	List your work activities.
VIII.	List your Church and Community service.
IX.	State why you believe you deserve the Kerri L. Kiker Memorial Scholarship.

Attach any letters of recommendations from teachers, co-workers, or church/community members.

Write an essay and attach it to this application. You may choose from the following topics:

- Evaluate a significant experience, achievement, risk you have taken or ethical dilemma you have faced and its impact on you.
- Discuss some issue of personal, local, national or international concern and its importance to you.
- Indicate a person who has had a significant influence on you and describe that influence.
- Describe a character in fiction, a historical figure, or a creative work (art, music, or science) that has had an influence on you and explain that influence.
- A range of academic interests, personal perspectives, and life experiences adds much to the educational mix. Given your personal background, describe an experience that illustrates what you would bring to the diversity in a college community or an encounter that demonstrated the importance of diversity to you.
- Topic of your choice.

Use 250 words minimum on the topic of your choice. Indicate in your essay which topic you have chosen. You must put your full name, date of birth and name of high school <u>on each sheet</u>.

Return this application by April 30th, 2024 to:

Family Life Chiropractic Center 351 East Highland St. Blue Ridge, GA 30513

Thank you for applying for this scholarship. Family Plan Inc. is a discount program offered at Family Life Chiropractic Clinics in Murphy, NC and Blue Ridge, GA. This plan allows patients to receive discounted affordable care while raising money for scholarships in our communities.

Dr. Stacey Davis CEO President

Dr. Sherry Bramlett Vice President

501 (c) 3 status is applied for