

APPLICATION PACKAGE CHECKLIST

1. ___ Applicant/Sponsor Information
2. ___ SAT/ACT Scores (High School Senior Only)
3. ___ Official School Transcript (Sealed)
4. ___ Class Rank Documentation (if not included in transcript)
5. ___ Essay
6. ___ Funds Distribution Form
7. ___ Three Sealed Letters of Recommendation (Mailed separately and Postmarked by Application Deadline)

Mail Completed Application and All Accompanying Information and
Documentation

Postmarked NO LATER THAN 13 March 2026 to:

DNLMSF Selection Committee
275 Rolling Pines Drive
Spring Lake, NC 28390

Thank You and Good Luck!

Tracking Number 2025 - _____
(OFFICE USE ONLY)

DAVID N. LEVINSON MEMORIAL SCHOLARSHIP FUND
2025 Application Worksheet

ELIGIBLE ADDRESS IN ANDERSON CREEK CLUB OR CROSSING:

Street Address: _____

Date You Occupied This Address: _____

APPLICANT INFORMATION

Name: _____
Last First Middle

Street Address: _____

City/State/Zip: _____

Phone: Home / Cell: _____ Work / Cell: _____

Email Address: _____

Date of Birth: _____ Place of Birth: _____ Gender: _____

Applicant's Relationship to Sponsor: _____

SPONSOR INFORMATION

Name: _____

Phone: Home / Cell: _____ Work / Cell: _____

Email: _____

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HIGH SCHOOL/COLLEGE/UNIVERSITY INFORMATION

High School: _____ Graduation Date: _____

College Level you will be entering in the Fall of 2026: FR _____ SOPH _____ JR _____ SR _____

College you attend/plan to attend: _____

Is this an online program? _____ Yes _____ No Student #: _____

Full-time Student? _____ Yes _____ No If No, # of credits per semester _____

Major Field of Study: _____

List all High Schools, Universities, Colleges and Technical Schools you have previously attended.

School: _____

City: _____ State: _____ Dates: _____ to _____ Degree: _____

School: _____

City: _____ State: _____ Dates _____ to _____ Degree: _____

GRADE POINT AVERAGE

HS GPA: _____ weighted / un-weighted (circle one) College GPA: _____

SAT/ACT Scores (High School Seniors Only)

SAT _____ Date _____ ACT _____ Date _____

If you intend to retake the SAT or ACT again in the near future, the updated results must be postmarked no later than 13 March 2026.

CLASS RANKING (High School Seniors Only)

High School Rank _____ of _____ total students _____ N/A (School does not rank)

OFFICIAL TRANSCRIPT: Provide current official transcript in a sealed envelope. If mailed, must be postmarked no later than 13 March 2026.

DAVID N. LEVINSON MEMORIAL SCHOLARSHIP FUND
2025 Application Worksheet

ACTIVITIES - Using the tables below, list extracurricular activities and organized sports in which you participated during the last 4 years. List the activities in order of importance to you. (If you would prefer to prepare a biography and attach it to the application that will be acceptable.)

EXTRACURRICULAR ACTIVITIES/ORGANIZED SPORTS:

ACTIVITY	# YEARS	LEADERSHIP POSITIONS, AWARDS & RECOGNITION

COMMUNITY ACTIVITIES

ACTIVITY	# YEARS	LEADERSHIP POSITIONS, AWARDS & RECOGNITION

WORK EXPERIENCE

Using the space below, please list any volunteer or paid work experience during the past 4 years beginning with your most recent position.

EMPLOYER	NATURE OF WORK	DATES OF EMPLOYMENT	HRS/ WEEK

Tracking Number 2025 - _____
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LIST ANY ADDITIONAL INFORMATION YOU FEEL IS PERTINENT TO THIS APPLICATION

EXAMPLES: Home schooling, child rearing, taking care of exceptional family members, special needs children, aging parents, etc.

PLEASE COMPLETE A TYPED ESSAY RESPONSE TO THE QUESTION BELOW ON A SEPARATE PAGE(S) NOT TO EXCEED 500 WORDS.

Essay Question: What is the attribute, quality, or skill that distinguishes you from everybody else and how did you develop it? This is your opportunity to tell us your story. You may wish to include some or all the following topics: What obstacles have you overcome to acquire an education? Why are you pursuing a college education? What degree or certificate program are you pursuing and why?

STATEMENT OF CERTIFICATION: I certify the information provided in this application is accurate and complete to the best of my knowledge. I understand failure to provide full documentation or falsification of credentials will result in disqualification of this application. I agree to provide, if requested, official documentation to verify information reported on this application. In the event, I receive a scholarship award and elect not to attend school during the calendar year, I will immediately return the award to the David N. Levinson Memorial Scholarship Fund. I also understand the decision of the committee is final.

Applicant's Signature

Date

Tracking Number 2025 - _____
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2025 Application Worksheet

Reference Evaluation Form
(Please copy this page if necessary)

Applicant's Name _____
Current School _____

What are the applicant's strengths? Comment on the applicant's character, responsibility, leadership, integrity, motivation, community service, work ethic, and any other characteristics that make this student special.

Based upon your contact with the applicant, do you believe that he/she demonstrates the ability to perform well and complete college? Yes _____ No _____

How long have you known the applicant? _____ Are you related? YES ___ NO ___

Identify your relationship to the applicant: _____

Name: _____ Position _____

Signature _____ Date _____

Please return directly to address below postmarked no later than 13 March 2026
DNLMSF Selection Committee, 275 Rolling Pines Drive, Spring Lake, NC 28390

DNLMSF Funds Disbursement Form

If you are awarded the David N. Levinson Memorial Scholarship Fund, scholarship funds will be sent directly to your institution. Please provide the following information in order to receive your funds. Failure to provide this information may result in forfeiture of your scholarship money.

Recipient's Full Name: _____

Street Address: _____

City/State/Zip: _____

Email: _____

Phone Number: _____

FOR DEPOSIT TO COLLEGE/UNIVERSITY

College/University: _____

Street Address: _____

City/State/Zip: _____

Phone Number: _____ Student ID Number: _____

NOTE: If the recipient has not yet made a decision as to which college/university he/she will attend, or if a Student ID Number has yet to be assigned, the scholarship payment will be held pending receipt of that information. Once the information is received, the payment will be forwarded for deposit.