



Fax:

Nahunta 912.462.6100 Kingsland 912.882.1362 Hilliard 904.845.7510

November 2024

Dear Scholarship Applicant:

Thank you for your interest in the Okefenoke REMC Scholarship program. OREMC annually awards 10 scholarships in the amount of \$2,000 each. Applicants for the OREMC Scholarships must reside in one of the eight counties included in OREMC's service area: Brantley, Camden, Charlton, Glynn, Ware or Wayne counties in Georgia; Baker or Nassau county in Florida.

- Applicants for the OREMC Scholarship are not required to reside in a household served by OREMC. Students of OREMC employees are also eligible.
- The OREMC Scholarship funds may be used at any accredited college, university, or technical school (not restricted to Georgia) in the U.S.
- Applicants may be either a high-school senior or an undergraduate college or vocational/technical student. Non-traditional students are also eligible to apply.

To apply, you must **complete a scholarship application and provide all required documentation** online at oremc.com/scholarships, submit via email to youthprograms@oremc.com, mail or deliver to one of our OREMC district offices **by 5 p.m. on Monday, January 20, 2025.**

Walter Harrison Scholarships

From the 10 students awarded an OREMC Scholarship, OREMC will submit two applications to Georgia EMC for the Walter Harrison Scholarship to be judged along with applications received from students all across the state.

- Applicants for the Walter Harrison Scholarship must live in a household (primary residence) of a member or an employee of OREMC.
- Walter Harrison Scholarship winners must use the funds at a college, university, or technical school located in Georgia.
- The number of scholarships awarded, and the amount of each scholarship, is determined by the amount of funding available each year.

Again, thank you for your interest in the Okefenoke REMC Scholarship program. If you have any questions, please feel free to contact me at 800-262-5131 ext. 1103 or via email youthprograms@oremc.com.

Sincerely,

Michele Hutchins
Director of Communications & Marketing

Post Office Box 1229 Hilliard, FL 32046-1229





KEFENOKE Scholarship Application

Applications must be received by 5 p.m. on Monday, January 20, 2025

Name:				
Address:				
Email:				
	(with area code): Last 4 digits of SSN:			
Applicant's electric utility:	□ Okefenoke REMC	☐ The Satilla REMC	□Slash Pine EMC	□ Georgia Power
Parent/Guardian information is no	ot required of adult, non-depen	dent applicants. If adult appli	cant is married, spouse's info	ormation must be included below.
Street Address:				
City:		State:	Zip:	
Parent/Guardian or Spouse N	lame(s):			
Mother/Guardian's or Adult	Applicant's place of empl	oyment:		
Work phone (with area code)):			
Father/Guardian's or Spouse	's place of employment:			
Work phone (with area code)):			
Academic Performance and	Potential:			
High school or college GPA: _				
S.A.T., A.C.T. or COMPASS AS	SET score:			
Extracurricular Activities (inc	clude separate page if nee	eded):		
Activities/Membership Organ	nizations:			
Offices Held in Organizations	:			
Honors & Recognitions Recei	ved:			

University/College/Technical School you	u plan to, or currently, attend:	
School Name:		
Contact person:		
Mailing address:		
Phone (with area code):		
Date of enrollment:	OR Current Status: □ Freshman □ Sop	ohomore 🗆 Junior 🗆 Senior
Tuition costs per quarter/semester: \$		
Financial Need Assessment (This inform	ation will be held in the strictest of confidence):	
Total adjusted gross household income ((from most recent tax return): \$	
Other household income: \$		
Number of family members residing in h	ousehold:	
Other factors which influence financial n	need:	
Proof of final	ncial information submitted may be required if scholarship i	is awarded.
Please attach/submit the following with	h this complete application:	
· · · · · · · · · · · · · · · · · · ·	ence to confirm admission to a college or technical	school. If student has not vet been
•	e required if chosen as a scholarship winner.	
	ch with reference to future plans and goals as wel your name, electricity provider or your place of res	•
•	ore submission to the judges and make for an unat	
	t college/technical school transcript.	
□ Copy of your S.A.T., A.C.T. or CO	•	
 Two letters of recommendation. 		
	ation along with all requested documents must be ship. I certify that all information reported on this	
Applicant's Signature	Date	