The Carolinas Food Industry Council (CFIC) is proud to offer employees of its member companies the opportunity to apply to win a $2,500 Everett & Trudy Suddreth Scholarship of Excellence Award. Funded by the Council’s charitable foundation, the Retail Consumer Alliance (RCA), this scholarship is awarded annually to a total of 40 deserving students.

$2,500 Scholarships Available for High School Seniors!

Who Is Eligible

- High School Seniors enrolling for the 2020 fall semester who are a spouse or dependent of a permanent, full-time employee of a CFIC Retail, Wholesale or Supplier member company. Employee must be employed for at least one year as of 1/1/20.
- Any student who at a minimum is a part-time employee of a CFIC Retail, Wholesale or Supplier member company for at least six months as of 1/1/20.
- The food industry employee, whether a parent, spouse, or student, must be employed with an CFIC member company located in North or South Carolina at the time the winners are selected. Qualified scholarship recipients may attend a college located in any state.
- Previous winners are eligible to reapply.

How To Apply

Visit our website at cficweb.org to print a copy of the application. If you need an application mailed call (919) 832-0811.

Completed application and official transcript must be postmarked by March 16, 2020 and mailed to:

RCA Foundation
Attn: CFIC Scholarship
PO Box 1030
Raleigh, NC 27602

Winners

- Scholarship winners will be selected by an independent academic scholarship evaluator.
- All applicants will be notified via email in June.
- Winners must be enrolled in college full-time for the 2020 fall semester.
- Scholarship awards will be mailed directly to the student and made payable to the college.

Check List

To ensure accurate completion before submission

☐ Completed and signed student section of application in its entirety. Incomplete applications will be rejected.
☐ Delivered page 3 of application to Guidance Counselor for counselor to complete.
☐ Mailed completed application and official high school transcript to RCA. Photocopies will not be accepted.

Questions? Contact John McNair at (919) 832-0811 or email johnm@ncrma.org

The Retail Consumer Alliance Foundation, Inc. (RCA) was organized in 2008 to foster stronger community partnerships between consumers and the retail industry. We do this by funding an annual educational scholarship program and making annual contributions to Feeding the Carolinas food banks.

The applications are reviewed by an independent academic scholarship evaluator, and winners are determined based on objective, measurable point-based criteria established by the RCA Board.

Applicants agree that scholarship funds are to be used solely for educational purposes but are not limited to tuition only. If the applicant does not attend an educational institution in the school year for which scholarship funds were to be awarded or for a partial school year, the scholarship applicant acknowledges that they have no property or vested rights in the scholarship funds, that RCA maintains all rights to these funds, and the funds shall be returned to RCA by the educational institution.
# 2020 Scholarship Application
## For High School Seniors

**Page 1 of 3**

<table>
<thead>
<tr>
<th>Completed by Student</th>
<th>Type or Print Legibly (blue or black ink only)</th>
<th>Incomplete applications will be rejected</th>
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<tbody>
<tr>
<td>Mr./Ms.:______</td>
<td>First Name:_________________________</td>
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<td>Permanent Mailing Address:</td>
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<td>State:________</td>
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<td>Phone:_______________________</td>
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*Student's Email:_____________________________________________________________________________________________

*Parent/Secondary Email (optional):__________________________________________________________________________

*An email will be sent to both addresses to notify you. Be sure to print legibly.

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**Eligibility/Work History** My eligibility to apply for this scholarship is based on the employment of:

- [ ] Parent or guardian (Complete A only)
- [ ] Myself (Complete B only)
- [ ] Both: Parent & Myself (Complete Both A & B below)

### A. Parent/Guardian or Spouse Employment Information:

- Parent Name:_________________________
- Name of CFIC member company that parent works for: ______________________________________________________________________
- Company is located in: City:________ State:____ (Store or company must be located in North or South Carolina)
- Company Phone #:____________________
- Employment began at this company on:________ (Must be employed at least one year as of 1/1/20 and at the time the scholarship is awarded; employment will be verified.)

### B. Student Employment Information:

- Student Name:_________________________
- Name of CFIC member company that student works for: ______________________________________________________________________
- Company is located in: City:________ State:____ (Store or company must be located in North or South Carolina)
- Company Phone #:____________________
- Employment began at this company on:________ (Must be employed at least six months as of 1/1/20 and at the time the scholarship is awarded; employment will be verified.)
- Average number of hours student works per week:_____

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**Completed by Student** (List additional information on a separate sheet of paper.)

Describe any additional part-time jobs you have held during the school years. *Include average weekly hours worked.*

___________________________________________________________________________________________________________________

___________________________________________________________________________________________________________________

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**CFIC Office Use Only:** Date Application Received: __________ Date Official Transcript Received: __________
Extracurricular Activities

Describe how you were involved in high school activities such as class or school offices, band or orchestra, athletics, dramatics, debate or oratory, school publications, pep club, etc. In the right-hand column, designate by number, the high school year in which you participated in each activity as follows: 1-Freshman 2-Sophomore 3-Junior 4-Senior.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Position Held</th>
<th>Hours per Week</th>
<th>Year of Participation</th>
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(List any additional information on a separate sheet.)

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<tr>
<th>Activity</th>
<th>Year(s) of Participation</th>
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Describe your involvement in community service or activities outside of school, such as Boy or Girl Scouts, 4-H Club, recreational or club sports, church organizations, volunteering etc.

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<th>Activity</th>
<th>Year(s) of Participation</th>
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List any special recognition you have received for outstanding schoolwork, extra-curricular or community service, such as honors, prizes or scholarships.

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<th>Recognition</th>
<th>Year Received</th>
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College you plan to attend during the fall semester of 2020: ____________________________

Major (optional): ____________________________

List all schools attended from 9th-12th grades.

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<tr>
<th>Name of High School</th>
<th>City and State</th>
<th>Attendance Dates</th>
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Student’s Release of Records

To comply with the provisions of the Family Educational Rights and Privacy Act of 1974, permission is hereby given to school officials to release the secondary school record and other requested information for consideration in this scholarship program.

Applicant’s Signature: __________________________________________ Date:____________________

Parent’s Signature (if student is under 18): __________________________ Date:____________________

*Email: ____________________________________________________________________________

*This email address will be the one used to notify you by June 2019. Be sure to print legibly.

I certify that all of the information contained in this application is correct to the best of my knowledge.

Applicant’s Signature: __________________________________________ Date:____________________

Completed by Guidance Counselor

☐ Enclosed is a copy of the student’s fall 2019 transcript and SAT and/or ACT scores (if applicable).
☐ Completed the information on right.
☐ Signed certification statement below.
☐ Mailed to: RCA Foundation
  Attn: CFIC Scholarship
  PO Box 1030
  Raleigh, NC 27602.

I certify that all the information on this form is accurate and that the student’s records have been included with the 3-page application.

Counselor’s Signature: __________________________________________
Counselor’s Name (PRINT): _________________________________________
Counselor’s Office Phone Number: _________________________________
Counselor’s Email Address: _________________________________

High School Type:
☐ Public ☐ Private
☐ Special or Magnet ☐ Home School

| GPA weighted (do not list unweighted) |
| SAT Scores (comp) |
| ACT Scores (comp) |

Mail application and official transcript to:

RCA Foundation
Attn: CFIC Scholarship
PO Box 1030
Raleigh, NC 27602

Postmarked by: March 16, 2020