

The 2025 Dixie Education Foundation Legacy/Florida Prepaid College Foundation

A student is eligible if he or she meets the following criteria:

1. GPA unweighted at 3.0
2. In grade-12 in a public school located within Dixie County Schools.
3. Be a Florida resident of Florida for 12 consecutive months prior to assignment to a Foundation Prepaid scholarship
4. A valid Social Security number and a Florida Driver's License.
5. Seeks to pursue a college degree in an approved Florida college.

Submission requirements:

1. Essay Entry & Parental/Legal Guardian Waiver Form and authorization.
2. One letter of recommendation from an educator (teacher/principal/coach) or professional (employer/community organizer) describing why the student is worthy to receive a scholarship and how he/she stands out from his/her peers.
3. A 200- to 250-word personal essay on how they have given back to their community, why the student believes he/she are deserving of the scholarship, and what his/her plans are for the future.

Additional information and resources:

1. Each submission must include a completed entry form.
2. The program will be open from **February 10, 2025– March 6, 2025**
3. Winner will receive a 1-Year Florida College Plan scholarship provided by the Dixie Education Foundation, Inc. Legacy, Florida Prepaid College Foundation.
4. Winner will be recognized at the annual scholarship event in **May 2025**.

The winners will receive either a 1 -Year Florida College Plan scholarship provided by the Dixie Education Foundation, Inc. entitled the Arthur Bellot Scholarship, Bump Faircloth Scholarship, Mary C Miller Scholarship.



Dixie Education Foundation, Inc.

Serving Dixie County Since 1997



2025 Dixie Education Foundation, Inc. & Florida Prepaid College Foundation

Arthur Bellot Legacy Memorial Scholarship

Bump Faircloth Legacy Scholarship

Mary C Miller Legacy Memorial Scholarship

www.myfloridaprepaid.com/legacyscholarship

Essay Entry & Parental/Legal Guardian Waiver Form

Deadline: March 6, 2025

Student Name: _____ Grade: _____

Date of Birth: _____

Title of personal Essay: _____

Name of School: _____

Home Mailing Address: _____

911 Address: _____

City: _____ State / Zip: _____ County: _____

Student Email: _____

Parent/Legal Guardian Name: _____

Parent/Legal Guardian E-mail Address: _____

Entry will only be accepted if this waiver is submitted with the following items:

One Letter of Recommendation from an educator or professional

250 Word Personal Essay

Completed Student Entry Form

Release Statement: As parent or guardian, I acknowledge that my child has written the attached essay and has followed all the guidelines and regulations. Should he or she win the essay contest, I agree to allow the essays to be distributed publicly. I also understand that if it is discovered my child plagiarized or that the thoughts expressed are not his or her own, the essays will be subject to disqualification. My child is a legal resident of Florida and attends a public high school in Dixie County, Florida.

Parent/Guardian Signature

Parent/Guardian Name (Print)

Parent/Guardian Telephone Number