



## 2026 COLLEGE SCHOLARSHIP APPLICATION Delegate Pam Queen - District 14

### RULES AND PROCEDURES

#### GENERAL INFORMATION (PLEASE READ ALL SECTIONS CAREFULLY!!!)

The Delegate Pam Queen College Scholarship Committee requires completion of her Scholarship Application including essay. All requested supplementary materials must be included with your submitted application in order to receive consideration for a scholarship award.

**Incomplete or late applications will NOT be considered.**

#### ELIGIBILITY REQUIREMENTS

Residence in District 14

Admission to or continuation at a college or university in Maryland or Unique Major Status\* (if attending an out of state college or university)

\* **Unique Major Status** can be granted if a student's major is not offered at any MD college or university. For more information, and to apply for this status, contact the Maryland College Aid Processing System at <https://mdcaps.mhec.state.md.us>.

#### SCHOLARSHIP CONSIDERATIONS

*Academic Achievement* based on GPA, rigor of study, and academic awards

*Community Contribution* based on level of involvement, length of involvement, and significance of contribution to the community

Items A, B & C (below) must be completed and **emailed by June 30, 2026**. **Completed** applications including your name in the file name and subject line can be emailed to:

**Pam.Queen@house.maryland.gov (preferred) or postmarked by June 30, 2026 and mailed to:**

Delegate Pam Queen Scholarship Committee  
House Office Building, Room 427  
6 Bladen Street  
Annapolis, MD 21401-1991

A. Completed Scholarship Application, including essay (200-250 words). Please use additional sheets to complete sections III and VI; make sure to include your name, address, and the correct section number at the top of each attached page.

B. Student Records

High School Students: **OFFICIAL HIGH SCHOOL TRANSCRIPT**

College Students: **OFFICIAL COLLEGE TRANSCRIPT MUST BE SUBMITTED BY THE COLLEGE**

C. Resume should highlight your *academic achievement* and *community service*.

Certificates and awards given in recognition of academic achievements and community service are welcomed; letters of recommendation are **not** required and will be discarded.

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**2026 COLLEGE SCHOLARSHIP APPLICATION**  
**Delegate Pam Queen - District 14**

Please type or print clearly.

**I. PERSONAL INFORMATION**

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip Code

Home/Cell Phone: (\_\_\_\_) \_\_\_\_\_ Date of Birth: \_\_\_\_\_

E-Mail Address [REQUIRED]: \_\_\_\_\_

Maryland College Aid Processing System (MD CAPS) ID [REQUIRED]: \_\_\_\_\_  
*Contact MHEC (410) 767-3301, for help if you are unsure of your MD CAPS ID*

2026-2027 FAFSA – Date of Completion (mm/dd/yyyy): \_\_\_\_\_  
*A completed FAFSA form is required in order qualify for scholarship funds*

Yes, I am a U.S. citizen \_\_\_\_\_ No, but I am an eligible non-citizen \_\_\_\_\_

**II. ACADEMIC INFORMATION**

High School or College presently attending: \_\_\_\_\_

Graduation Date: \_\_\_\_\_ (Mo/Yr) Unweighted GPA: \_\_\_\_\_

Maryland College/University you plan to attend in 2026-2027 (Name and Campus):  
\_\_\_\_\_

Are you an on-campus resident or commuter student? \_\_\_\_\_

Will you be enrolled full time or part-time? \_\_\_\_\_

Intended major(s): \_\_\_\_\_

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**III. ACTIVITIES/RESUME (Briefly on Attached Sheet)**

- A. High School/College Activities
- B. Community Activities
- C. Honors, Awards, and Special Achievements
- D. Work Experience (*Past 3 Years*)

**IV. FAMILY INFORMATION**

Head of Household:

Male  Female |  Single  Married  Divorced  Widowed

\_\_\_\_\_  
Full Name and Relationship

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Position

Number of family members attending college (including you): \_\_\_\_\_

**V. FINANCIAL AID & OTHER CONSIDERATIONS**

Please list **ALL** financial aid applied for and whether it has already been awarded (please list the amount and date awarded). Include type of scholarships, grants, state, legislative, and others.

**Name of Scholarship, Date Received, Amount, Type**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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*If applicable, please provide any additional information that demonstrates why you deserve consideration for a Delegate college scholarship.*

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**VI. ESSAY QUESTION**

Write and attach an essay of 200-250 words outlining the role *community service* currently plays and will play in your future plans.

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**VII. CERTIFICATION**

I certify that the information in this scholarship application is true and correct to the best of my knowledge.

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Signature of Applicant Date

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