Trumbull County Federation of Women's Clubs

(Financial Need Based Scholarship Application)

The object of this Organization shall be to bring the Women's Organizations of the County into closer touch with one another for the furtherance of any good cause, which may be of common interest.

The Club scholarship is awarded irrespective of race, color, creed, sex or age. This scholarship is for a qualified student who has applied to further their education at an accredited university, college, junior college, community college or technical/vocation school. The applicant must have attained a grade point average of 2.5 or greater, demonstrate a financial need, show academic and achievement awards and provide information on the student's character through personal recommendations and his /her attainment of a grade average of 2.5 or greater.

To apply for this one time nonrenewable $500 scholarship, please complete the attached application to the best of your knowledge and ability. It is important that your answers are complete, presented in the requested order, and all requested information is returned to determine applicant's eligibility for the scholarship. **APPLICATION MUST BE RECEIVED BY APRIL 30, 2021.**

Prior to submission, use the following checklist to be certain application is complete and submit in the following checklist order:

1. The Guidance Counselor has completed the appropriate section.
2. The application is completely filled out and signed by you (in ink).
3. A typed list of academic, civic, employment, and achievement awards or accomplishments is provided.
4. A typed essay (following stated rules) is included, and
5. One letter of recommendation is included.

Return completed application with required attachments, **in checklist order** to:

Terri Crabbs, Scholarship Committee Chair
Trumbull County Federation of Women's Clubs
3589 Sodom Hutchings Rd.
Cortland, Ohio 44410

Question should be directed to Terri Crabbs at 330-637-3845.

TRUMBULL COUNTY FEDERATION OF WOMEN'S CLUBS
Scholarship Application

Date _____

Name _____

Address _____

City/State/Zip _____

Home Phone _____

Birthdate: _____ ( ) Male ( ) Female

Are you a High School Student? Please circle **Yes** **No**

If yes, what school do you attend? _____

EDUCATION:
High School Diploma Yes No

Date of Graduation _____ Grade Point Average _____

Give names of colleges with which you have applied for admission:
1. _____ Accepted: Yes No Unsure
2. _____ Accepted: Yes No Unsure
3. _____ Accepted: Yes No Unsure

Planned Course of Study: _____

FINANCIAL NEED:
Have you made application for any other scholarships or outside assistance?
1. _____ Amt. Awarded or Applied for: $_____
2. _____ Amt. Awarded or Applied for: $_____
3. _____ Amt. Awarded or Applied for: $_____

EMPLOYMENT:
Are you employed? (CIRCLE ONE) Yes No If yes, hours per week _____
Name of Employer _____
Position(s) held _____
Average Monthly Earnings: _____
Please indicate if you will supplement your resources through full or part time employment while furthering your education:_____
_____
_____

CERTIFICATES, AWARDS, ACHIEVEMENTS, AND COMMUNITY ACTIVITIES:
Attach a list of any academic, civic, or employment awards or achievements. Include any church, school, or other volunteer activities.

ESSAY:
Compose a **300-word essay** on the topic "Why I need scholarship help". The essay must be typed, double-spaced, and included with this application. Please note that the essay is an important means by which to judge your communication skills and financial need.

REFERENCE:
Enclose one letter of recommendation on your behalf. This letter should attest to your personal, education, and/or employment accomplishments.

GUIDANCE COUNSELOR CERTIFICATION:

Student's Name _____

ACT Composite _____ SAT Composite _____

Rank in Class _____ Total Number in Class _____

Cumulative GPA (Based on a 4.0 Scale) Must have a 2.5 or above _____

Year of High School Graduation _____

Name/Address/Phone Number of High School: _____

_____

Name of Guidance Counselor (printed): _____

Signature of Guidance Counselor: _____ Date_____

SCHOLARSHIP CONDITIONS:
I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that my picture may be taken and used for any purpose deemed necessary to promote the Federation's scholarship program.

I hereby understand that if chosen as a scholarship winner, according to Trumbull County Federation of Women's Clubs Student Scholarship Fund policy, I must provide evidence of enrollment / registration at the post-secondary institution of my choice before scholarship funds can be awarded. The scholarship funds will be paid directly to the student. Furthermore, I understand this scholarship shall only be used for college related expenses.

It is also requested that the student send a thank you note to the Trumbull County Federation of Women's Clubs in care of the Scholarship Chair, along with a senior picture to be used for media purposes.

_____ _____

Signature of Applicant Date