

SCHOLARSHIP APPLICATION COVER

J.E. Ober Faculty & Staff

I certify that all information given in every part of this application is true. I understand that falsification of information may result in termination of any scholarship granted.

I grant permission for Garrett High School Guidance Office to release a copy of my transcript to the individual or group responsible for awarding or administering this scholarship.

Student Signature

Date

Parent/Guardian Signature

Date

J. E. Ober Faculty & Staff Scholarship

Honoring Retired Teachers & Staff

J. E. Ober Elementary employees contribute each year to a scholarship fund that honors retired faculty and staff. A scholarship from this fund in the amount of \$500.00 is awarded to a qualifying Garrett High School Senior each year.

Requirements:

- 1. Applicant must have attended J. E. Ober sometime during their elementary career.**
- 2. Applicant must have a career goal in the field of EDUCATION.**
- 3. Applicant must have a "C" average at 7th semester (term 2 senior year).**
- 4. Applicant must have good character as established in a letter of recommendation from a non-family member (see number 7 below).**
- 5. Applicant must be accepted to a four-year college or university.**
- 6. Applicant must submit a brief essay (no more than 2 pages typed and double-spaced) describing why he/she deserves the scholarship and what his/her educational goals are.**
- 7. Applicant must submit one (1) letter of recommendation from a non-family member that describes the student's good character.**

This scholarship will be paid directly to the awarded applicant after presenting confirmation of acceptance and enrollment to his/her chosen college or university.

Please submit the application, required essay, and letter of recommendation to Garrett High School Guidance Office.

GARRETT SCHOLARSHIP

NAME _____ DATE OF BIRTH _____

ADDRESS _____ CITY _____ ZIP _____

HOME PHONE _____ DIPLOMA TYPE _____

FATHER'S NAME _____

Occupation/Employer _____

MOTHER'S NAME _____

Occupation/Employer _____

Check if applicable: Father deceased Mother deceased Parents divorced

Ages of other children in your family _____ Number of family members in college _____

School you are planning to attend _____

City / State of School _____ Full-time student Part-time student

Intended Major _____ Accepted Applied-awaiting decision

Career Goal _____

Living arrangements: On-campus Off-campus (independently) Off-campus (with family)

School or Community Activities in which you have participated or positions held in High School

Please include any workshops attended (may attach separate page):

<u>Activity</u>	<u># of Years</u>	<u>Leadership Positions, Awards, Recognition</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Work Experience:

Why applicant desires scholarship and how it will be used:

I understand that if awarded this scholarship, it may be sent directly to the college, university or technical college I am attending upon showing proof of enrollment.

Signature of Applicant