Benefit of Hope Curvis F. Rhyne Scholarship

P.O. Box 2727 Alliance, Ohio 44601

Curvis F. Rhyne Scholarship

In January 2017, the Benefit of Hope established the Curvis F. Rhyne Scholarship fund. The Benefit of Hope Curvis F. Rhyne Scholarship fund is available to all seniors residing in the Alliance area who plan to attend an accredited college or university upon graduation.

To apply for this award, please submit the following:

- 1. A completed application form
- 2. A copy of your transcript
- 3. Two faculty reference letters
- 4. Two personal reference letters
- 5. On an attached sheet explain in detail (100 words or more) your career goals

In order to be considered, all of the above materials must be submitted by

Mail to:

Robin Allen P.O. Box 2727 Alliance, Ohio 44601

Thank you for your interest and Good Luck.

Robin Allen

Chairman of Benefit of Hope Curvis F. Rhyne Scholarship Committee



Curvis F. Rhyne

Memorial Scholarship Application

The application process is restricted to high school senior intending to pursue studies, upon graduation, at an accredited college or university. The following information is required for the confidential use of the selection committee. In order to be considered, all questions must be answered before the application is submitted. Please print or type.

PERSONAL INFORMATION:

Full Name:	Phone:		
Address:	City:Zip		
Birthdates:	General Health:		
Father's Name in full:			
Address:	Address:		
Relationship:	Relationship:		
Employed by:	Employed by:		
Name, relationship and address of person(s) from who you derive your financial support:		
Name:	Name:		
Address:	Address:		
Relationship:	Relationship:		
Number of sisters and brothers and their a	ges:		
Numbers of sisters: Ages Nu	umber of brothers: Ages:		
SCHOOL INFORMATION:			
Elementary School(s)	When:		
Middle school (s):	When:		
High school(s):	when:		
Anticipated Graduation Date:	Cumulative GPA:		
ACTIVITIES & HONORS:			

High School Activities:

High School Honors: COMMUNITY & LEISURE INFORMATION: Community Activities: Hobbies: SCHOLARSHIP INFORMATION: List the other scholarships you have applied for: Amount received to date: COLLEGE INFORMATION: What college or university do you plan to attend: Have you been accepted for fall term? What course of study do you plan to take? On an attached sheet of paper please explain in detail (100 words or more) your career goals. APPLICATION CHECKLIST: Completed application form 2 Faculty reference letters 2 Personal reference letters Transcript copy Career goals essay Student Signature: Date: Parent Signature: Date: Date:	ACTIVITIES & HONORS: (Continued)					
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