

RUTH WOLTER TUITION GRANT

Please help us make this information available to qualified persons. Feel free to copy this and pass it out to your departments and any interested person.

www.collegeclubofcanton.org

The College Club of Canton is offering a tuition grant for the mature woman who needs one year or less to complete her college degree. This is also available to graduates who need additional requirements for a specific type of employment, and to licensed nurses who need an additional year for a degree.

This is being offered with the hope that it will encourage a woman whose education was interrupted for some reason to return to college, thus enabling her to work in an educational, service, or cultural field.

Any applicant for this grant must live in the College Club community (Stark & adjacent counties) and be willing to work in her field in this area when she has completed her course of study.

Any woman interested in applying for this grant should be assured of acceptance by her chosen college or university and be able to present a definite plan to study for the completion of her degree requirements.

Applications may be secured from any member of the committee whose name is listed below or on the College Club of Canton web site www.collegeclubofcanton.org. To be eligible for consideration this year, they must be returned before March 1, 2021 to the Ruth Wolter Tuition Grant chairperson, (NOT the College Club P.O. Box):

Jodie Hawkins
11863 Meadow Lane NW
Uniontown, OH 44685
(330) 354-5167 jodiehawkins12@yahoo.com

Committee:

Katie Cerrone Arnold	(330) 806-1644
Mary Lou Milligan	(330) 768-7932
Nancy Shanklin	(330) 415-6736
Catherine Sherman	(330) 284-5029

CHECKLIST for APPLICATION
THE RUTH WOLTER TUITION GRANT
THE COLLEGE CLUB OF CANTON, OHIO

www.collegeclubofcanton.org

QUALIFICATION CHECKLIST*

Prior to completing this application, make sure that you meet the qualifications:

- € Applicant is pursuing a Bachelor's Degree OR Graduate Degree OR Post-baccalaureate Certification OR Post-graduate Certification.
- € Applicant is over 25 years of age as of March 1st of the current year.
- € Applicant resides in one of the following counties:
Carroll, Colombiana, Holmes, Mohoning, Portage, Stark, Summit, Tuscarawas, or Wayne.
- € Applicant will be registered for at least one course starting after May 2021.
- € Applicant will complete her degree requirements by June 2022.

APPLICATION CHECKLIST:*

Incomplete applications will not be considered. Make sure to include all of the following in your application packet.

- € Completed application.
- € Four letters of reference (One from your present or most recent employer and three others. References should **NOT** be relatives or casual acquaintances.)
- € Current resume listing previous employment, previous college attendance and current or previous community service. Include dates when appropriate.
- € A cover letter describing the following:
 - a. Why are you requesting this grant?
 - b. How do you plan to use your training to better the local community?
 - c. Any additional information concerning your situation that you feel would be helpful: scholarships, grants or other financial aid.
 - d. Reason for need of this grant: financial need, student loans, etc.
- € An outline of the courses (by catalogue name and number) that you plan to take, indicating the cost for each.
- € A current photo so the committee can recognize you at the interview.

* NOTE: These checklists are for the applicant's reference only and do not need to be included in the submitted application.

APPLICATION for THE RUTH WOLTER TUITION GRANT THE COLLEGE CLUB OF CANTON, OHIO

www.collegeclubofcanton.org

All four letters of reference and a current resume MUST be included with this application Please include a recent photo

MAIL TO: Jodie Hawkins, 11863 Meadow Lane NW Uniontown, OH 44685

All applications must be postmarked by March 1, 2021.

Please use additional sheets if you need more room to complete any questions.

Incomplete applications will not be considered.

PERSONAL

Name in Full (Last) (First) (Maiden) S - M - W - Div - Sep

Spouse Name in Full

Address (County)

(Zip) No. of Years

Last Address No. of Years

Home phone Cell Phone: Date of Birth

Email County of residence:

List All Dependent Children (Name-Age-School-Grade-Work)

Income: Self \$ Income: Spouse \$

Spouse Occupation: Title:

Name & Address of Spouse Employer

Income: All Other Sources and Amounts \$

List: (You may list additional volunteer activities on a separate page or on your included resume)

Club Membership and offices or Chairmanships held Professional Affiliations

OCCUPATION BACKGROUND:

PRESENT OCCUPATION Location

Name of Employer No. of Years

Address of Employer

Other Work Experience

Include a current resume listing all previous employment.

Provide contact information for your present or immediate past employer, if not employed, along with a letter of reference with this application from the person you list: (i.e. principal, head of agency, director of nurses)

(Name) (Address) (Title) (Phone)

ACADEMIC BACKGROUND :

High School(s) Attended _____
(Name) (City, State) (Year)

PREVIOUS COLLEGE BACKGROUND: (If need list additional college degrees and attendance on your resume.)

Name of College _____

Address of College _____

Dates Attended _____

Major(s) _____ Minor(s) _____

List Degrees, if any: _____

Remarks: _____

GRANT INFORMATION :

Name of College you plan to attend: (Include name or names of those you contacted at college with whom we could contact in your behalf; e.g. a teacher in major field),

College _____
(Name) (Location)

Contact _____
(Name) (Title) (Phone)

Present Classification (ie. senior, grad student, etc.) _____

Degree / Certification Sought _____

Intended Vocation _____

Date expect to enter _____ Date expect to receive degree or complete study _____
(Mo) (Yr.) (Mo) (Yr.)

List approximate amount of money needed: \$ _____ Amount requested: \$ _____

On a separate sheet, please answer the following:

- Why are you requesting this grant?
- How do you plan to use your training to better the local community?
- Outline the courses by catalogue name and number that you plan to take, and indicate the cost for each.

REFERENCES :

Should **NOT** be relatives or casual acquaintances. Include letters of reference with this application from each person you listed.

1. _____
(Name) (Address) (Occupation) (Phone)

2. _____

3. _____

ADDITIONAL INFORMATION: Include anything concerning your situation that you feel would be helpful:

scholarships, grants or other financial aid: _____

Applicant's Signature _____ Date _____