

STEPHANIE KEMP MEMORIAL SCHOLARSHIP

Due date to guidance office: March 31

Stephanie Kemp graduated from Wellsville-Middletown R-1 in 2005. She was an exceptional person who had a true zest for life. She participated in many extra-curricular activities in high school. She worked while she attended junior college and, later, business college where she completed her degree. Stephanie touched many people with her smile and her laughter until her accidental death on September 18, 2015.

APPLICATION CRITERIA

- Open to any graduating senior at Wellsville-Middletown R-1 High School who will be attending an institution or program to further their education
- Non-renewable
- Minimum GPA of 2.50
- Emphasis on extracurricular participation OR work experience OR a combination of both
- Transcript must be attached
- Application is due to the last school day of March each year.
- Amount of scholarship is \$500
- One recipient and one alternate will be chosen
- Payment will be made to the school after the recipient has completed the first semester with a GPA of at least 2.00 and shows proof of 2nd semester enrollment as a full time college student
- Must contact Cindy Kemp (ckemp@rallstech.com or 563-684-2415) for payment

CERTIFICATION OF HIGH SCHOOL (TO BE COMPLETED BY COUNSELOR)

This is to certify that this applicant ranked _____ after 7 semesters in a class of _____ seniors, and has a GPA of _____. Date of high school graduation will be _____. The applicant is in good standing and is a worthy student whom I would recommend for scholarship support. This application will be sealed in my presence, with cover page retained in my office until selection of applicant has been made by the Stephanie Kemp Memorial Scholarship Committee.

Signed: _____

Title: High School Guidance Counselor

Date: _____

NOTE: Once this application has been completed, please return to your High School Guidance Counselor

STEPHANIE KEMP MEMORIAL SCHOLARSHIP APPLICATION

Name of Student: _____

Parent or Guardian's Name(s): _____

Student's Address: _____

Student's Cell Phone Number: _____

Student's E-mail Address: _____

Educational Institution or Program student will be attending: _____

What is your intended field of study: _____

What is your expected annual cost of attendance? Include all costs, i.e. room and board, required tools or hardware and software, etc. _____

Describe/list your participation in high school activities, both extracurricular and community, including positions of leadership and responsibility. You may attach a resume or data sheet if desired.
