2023 Wayne Shoemaker

Memorial Scholarship

**Application**

***The Okaw Valley High School graduating senior must include an official transcript, must have filed a FAFSA application, must have two (2) letters of recommendation (one must be from a teacher), and must write a 500 word essay to be considered for this scholarship.***

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_D.O.B.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_

Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (if not the same as the student): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Older Siblings: \_\_\_\_\_\_\_\_\_\_\_\_ Number of Siblings in College: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Younger Siblings: \_\_\_\_\_\_\_\_\_\_

High School GPA: \_\_\_\_\_/\_\_\_\_\_ Class Rank: \_\_\_\_\_/\_\_\_\_\_\_ ACT or SAT Score: \_\_\_\_\_

Extracurricular Activities (both in and out of school) – **Please Attach**

Community Service Activities & Hours – **Please Attach**

Special Awards and Honors – **Please Attach**

College Preference (1st Choice) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Estimated Yearly Expense \_\_\_\_\_\_\_\_\_

College Preference (2nd Choice) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Estimated Yearly Expense \_\_\_\_\_\_\_\_\_

***Please attach a 500 word typed essay (Times New Roman, .12) on why you volunteerism is important for your community. This is a very important criterion; be specific as possible.***

Student’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COMPLETE APPLICATION MUST BE SUBMITTED TO Mrs. Bonnie Scott**

**NO LATER THAN APRIL 14, 2023**