

# RAYMOND J. PACK SCHOLARSHIP

Of the Peter J. Blosser Student Loan Fund

## 2023 Scholarship Application

**All questions need answered to complete application**

Name: \_\_\_\_\_ U.S. Citizen \_\_\_\_yes \_\_\_\_no  
Date of Birth: \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ House Phone \_\_\_\_\_  
Email address: \_\_\_\_\_ Cell phone \_\_\_\_\_  
Address: \_\_\_\_\_ Zip \_\_\_\_\_  
High School attending: \_\_\_\_\_ Graduation Date: \_\_\_\_\_  
How long Ross County Resident? \_\_\_\_\_ Awards Ceremony Date: \_\_\_\_\_  
FAFSA Expected Family Contribution \$ \_\_\_\_\_ HIGHEST ACT/SAT SCORE \_\_\_\_\_  
I hereby apply for the Raymond J. Pack Scholarship to assist in the payment of my educational expenses while attending: \_\_\_\_\_ (Name of school)  
I have been accepted by this school \_\_\_\_yes, \_\_\_\_no,  
Major Field of study planned: \_\_\_\_\_  
Professional Goals: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Important: Please make a statement which you feel will provide information of value to the committee in considering this application, particularly any handicaps or obstacles you have had to overcome.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Use reverse side of this form or an additional 1-2 page summary, if needed.)

Father/Guardian: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Address: \_\_\_\_\_  
Mother/Guardian: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Address: \_\_\_\_\_  
Best contact of parent/guardian: \_\_\_\_\_ (home #) \_\_\_\_\_ (cell #)  
Annual Adjusted Household Income: \$ \_\_\_\_\_ Number of children in family \_\_\_\_\_  
Number of other children in college: \_\_\_\_\_ How many children still live at home? \_\_\_\_\_  
Scholarships awarded & amounts : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Any other comments concerning financial need: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

Signed: \_\_\_\_\_

**Please return completed application and letters of recommendation to your Guidance Counselor by Wednesday, April 5, 2023.**

**The application needs to be received in the Blosser office by Tuesday, April 11, 2023.**

# 2023 RAYMOND J. PACK SCHOLARSHIP

Of the Peter J. Blosser Student Loan Fund

## Counselor/Administrative Recommendation Letter for Scholarship

Name of Applicant: \_\_\_\_\_

Your knowledge of this student will assist the Peter J. Blosser Trust in considering their qualifications for the Raymond J. Pack Scholarship. May we have your recommendations, from either school records or personal knowledge, on the following questions? Your statement will be given considerable weight and be held strictly confidential. A transcript would be greatly appreciated.

1. Academic aptitude and promise:

Overall academic grade point average \_\_\_\_\_

Ranks \_\_\_\_\_ out of a class of \_\_\_\_\_ students.

What other academic aptitude and promise does the student show?

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2. Personal qualification: Does this student accept responsibility without prodding? Mention any activities in which you have observed the applicant. Give your estimate of the quality of their performance. \_\_\_\_\_

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3. To the best of your knowledge, has the student made accurate statements on their application concerning their plans, activities, and personal & financial situations?  
Yes \_\_\_\_\_ No \_\_\_\_\_

4. Do you feel that the student will follow through on their plans to attend and finish their college education? \_\_\_\_\_ Confident, \_\_\_\_\_ Probable, \_\_\_\_\_ Unsure.

5. Please address the students financial need: \_\_\_\_\_

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6. Any other scholarships known to be receiving? \_\_\_\_\_

7. Additional Remarks: \_\_\_\_\_

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Date: \_\_\_\_\_

Signed: \_\_\_\_\_

Scholarship Awards Day : \_\_\_\_\_ Title: \_\_\_\_\_

**This form must be completed by the High School Counselor (or Principal) by Wednesday, April 5, 2023.**

**The completed application needs to be received in the Blosser office by Tuesday, April 11, 2023.**



# 2023 RAYMOND J. PACK SCHOLARSHIP

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## Personal Letter of Recommendation for Scholarship

Student Applicant: \_\_\_\_\_

The above student is applying for a scholarship with us. Since you are familiar with this student personally, we would appreciate your thoughts and opinions in helping us determine the best candidate for our scholarship funds.

1. How long have you known the applicant? \_\_\_\_\_

2. Is the applicant dependent upon his/her own resources? \_\_\_\_\_

\_\_\_\_\_

3. Will the applicant make the most of a college education? \_\_\_\_\_

\_\_\_\_\_

4. If this scholarship choice were yours, would you favorably and unreservedly consider giving money to this applicant to attend college? \_\_\_\_\_

\_\_\_\_\_

5. Please give your impressions of the applicant.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Occupation or Title \_\_\_\_\_

Relationship to student \_\_\_\_\_

**Please return this letter to the High School Guidance Counselor by Wednesday, April 5, 2023. The completed application needs to be received in the Blosser office by Tuesday, April 11, 2023.**