Zach Farmer Memorial Scholarship

INFORMATION AND INSTRUCTIONS

QUALIFICATIONS:
1. The applicant must be a student at Eastern, Piketon, Waverly and Western School System.
2. The applicant must be accepted at a college, university or technical school.
3. The applicant must have a minimum G.P.A. of 2.5 on a 4.0 scale.

INSTRUCTIONS FOR SUBMITTING APPLICATION:
1. The applicant/student must complete pages 1 and 2.
2. The applicant and parent/guardian must sign page 2.
3. The guidance counselor or principal must complete and sign page 3, “Counselor or Principal Evaluation”. A certified copy of the student’s transcript must be included with the application.
4. The application deadline is April 29th. All applications must be delivered or postmarked by April 29th. It is the student’s responsibility to insure all documentation is included with the application.
5. Applications should be sent to: Kelsie Farmer
   1347 Prosperity Road
   Waverly, OH 45690

SELECTION OF APPLICANT:
1. One student will be selected from: Eastern School System, Piketon School System, Waverly School System and Western School System.
2. The scholarship will be awarded only to students that meet the listed qualifications.
3. The successful students will each receive a $1000.00 scholarship.
4. The successful students will be required to sign a receipt of the scholarship and provide proof of acceptance at a college, university or technical school.
5. All decisions of the selection committee will be final. There will be no appeal process.
Zach Farmer Memorial Scholarship

Applicant/Student Information

Please print all information.

Full Name
(First Name) __________________________ (Last Name) __________________________ (Middle Initial) __________________________

Address
(Number & Street/ Route/ P.O. Box) __________________________ (City) __________________________ (Zip) __________________________

Phone __________________________ Date of Birth ____________ Sex ____________

High School __________________________ (Date of Graduation) __________________________

Parent/Guardian Name
First Name __________________________ Last Name __________________________ Middle Initial __________________________

Name of College/University/Technical School You Plan to Attend __________________________

Major Field of Study __________________________ School Address __________________________

Employment Background (List all jobs you have held including summer employment)

<table>
<thead>
<tr>
<th>Name &amp; Address of Employer</th>
<th>Job Title/Responsibilities</th>
<th>Dates of Employment</th>
<th>Hours Per Week</th>
</tr>
</thead>
<tbody>
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<td>From</td>
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</tbody>
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Activities and Organizations (List all participation including school, church/civic groups and volunteer services)

Honors and Awards (List all you have received during high school)

Rec'd Date: __________________________ Page 1 of 3 School District: __________________________
I confirm the information on this application is accurate and complete to the best of my knowledge. I understand that incomplete information or failure to submit all required documentation listed in the instructions will disqualify my application.

Applicant/Student Signature __________________________ Date __________

As the applicant's parent or guardian, I confirm that the applicant has my permission to apply for the "John Eaton Memorial Scholarship". I verify that all information provided is accurate and complete to the best of my knowledge.

Parent/Guardian Signature __________________________ Date __________
Zach Farmer Memorial Scholarship

Counselor or Principal Evaluation

(Must be completed by school personnel and submitted with application)

<table>
<thead>
<tr>
<th>Student's Full Name</th>
<th>First Name</th>
<th>Last Name</th>
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Academic Status: Complete the information using the student's status or achievement at the end of the most recent grading period of the senior year:

<table>
<thead>
<tr>
<th>Grade Point Average</th>
<th>on a possible scale</th>
<th>Rank in Class</th>
<th>of</th>
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ACT Score or SAT Score Attendance Record (number of absences): Junior Year Senior Year

Personal Observation: Complete the information based on your personal observation of the student:

Rating System: 5=Outstanding, 4=Above Average, 3=Average, 2=Below Average, 1=Poor

1. Rate the student on a scale of 1-5 as to his/her overall effort exhibited during the school year:
   - Outstanding
   - Above Average
   - Average
   - Below Average
   - Poor

2. Rate the student on a scale of 1-5 as to his/her inclination to succeed in post secondary education:
   - Outstanding
   - Above Average
   - Average
   - Below Average
   - Poor

3. Rate the student's overall character on a scale of 1-5:
   - Outstanding
   - Above Average
   - Average
   - Below Average
   - Poor

4. Based on your knowledge of the student, indicate your perception of his/her need for financial assistance:
   - Definite Need
   - Possible Need
   - Questionable Need

Has this student been awarded any other scholarships? If so please indicate which ones and the value.

Signature of Counselor or Principal Date

*PLEASE REMEMBER TO ATTACH A TRANSCRIPT OF GRADES WITH THIS FORM.*