

**BIG WALNUT EDUCATION FOUNDATION, INC.
2020**

CONTINUING COLLEGE SCHOLARSHIP APPLICATION

Restrictions: Graduate of Big Walnut High School
Enrolled full-time at an accredited college or university
College GPA of 2.5 or better
FAFSA is mandatory

Criteria for evaluation:

- 25% GPA – college confirmation required
- 25% FAFSA
- 20% Work Experience
- 20% Extracurricular Activities
- 10% Proof of Registration

BW Ed. Use:	Score
GPA	
FAFSA	
Work experience	
Extracurricular	
Registration	
Total	

Financial Need: You are required to complete the FAFSA (Free Application for Federal Student Aid) and submit your EFC number with this application. **SAR must be attached to this application. Without your submission of an EFC number, your application will not be evaluated.**

(Please type or print)

APPLICANT'S NAME _____

SCHOOL IN WHICH ENROLLED _____

APPLICANT'S ADDRESS AT SCHOOL:

GENDER: GENDER: M F (CIRCLE ONE)

BIRTH DATE: _____

APPLICANT'S PERMANENT ADDRESS:

PERMANENT ADDRESS TELEPHONE # _____

APPLICANT'S EMAIL ADDRESS: _____

PARENT'S EMAIL ADDRESS: _____

The Big Walnut Education Foundation, Inc. reserves the right to revoke any student's scholarship funds if the student's conduct is deemed unethical or illegal. The Foundation's decision will be final and the student will be notified in writing.

Briefly state the degree program, major or course of study you are pursuing.

Completed applications should be received by BWHS School Counseling Office by Thursday, April 2, 2020 at 3:00 p.m.

Mail to: Big Walnut High School Counseling Office 555 S. Old 3C Highway, Sunbury, OH 43074

Collegiate Extracurricular Activities

*provide post high school activity only, attach additional pages as needed

School Activities & Clubs [Check those you were involved in and identify the number of years]

<input type="checkbox"/> Band _____ yrs. <input type="checkbox"/> Baseball _____ yrs. <input type="checkbox"/> Basketball _____ yrs. <input type="checkbox"/> Bowling _____ yrs. <input type="checkbox"/> Cheer _____ yrs. <input type="checkbox"/> Choir _____ yrs. <input type="checkbox"/> Color guard _____ yrs. <input type="checkbox"/> Cross Country _____ yrs. <input type="checkbox"/> FFA _____ yrs. <input type="checkbox"/> Football _____ yrs.	<input type="checkbox"/> Golf _____ yrs. <input type="checkbox"/> Gymnastics _____ yrs. <input type="checkbox"/> Jazz Band _____ yrs. <input type="checkbox"/> Lacrosse _____ yrs. <input type="checkbox"/> Play Production _____ yrs. <input type="checkbox"/> Soccer _____ yrs. <input type="checkbox"/> Softball _____ yrs. <input type="checkbox"/> Student Council _____ yrs. <input type="checkbox"/> Swim _____ yrs. <input type="checkbox"/> Tennis _____ yrs.	<input type="checkbox"/> Track & Field _____ yrs. <input type="checkbox"/> Vocal Jazz _____ yrs. <input type="checkbox"/> Volleyball _____ yrs. <input type="checkbox"/> Wind Ensemble _____ yrs. <input type="checkbox"/> Wrestling _____ yrs. <input type="checkbox"/> _____ yrs. <input type="checkbox"/> _____ yrs. <input type="checkbox"/> _____ yrs. <input type="checkbox"/> _____ yrs. <input type="checkbox"/> _____ yrs.
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Community Clubs/Groups/Religious Involvement [List organizations and/or volunteering activities]

Paid Work Experience [List most recent employment first]

Business:	Position:	Employment Dates:

Awards and Honors [List awards and honors received citing specific year(s) and reasons for award]

Other [Feel free to list any other pertinent information you wish to add for consideration]

By affixing my signature to this application I verify that all statements above are true.

Signature _____ Date _____

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COLLEGE ENROLLMENT VERIFICATION FORM

ADMISSIONS OFFICE: It is the responsibility of the applicant to obtain enrollment verification as well as an official college transcript of his/her grades to send with this application. Please complete the following and include your signature.

APPLICANT'S NAME: _____

I am verifying that the above applicant is a student in good standing who is planning to be enrolled full-time

at _____ for the fall of 2020.
(Name of college or university)

Signature of school official: _____

Date: _____