

**Williamsport Lycoming Community Foundation Scholarship Application
for Montgomery Area School District Scholarship Awards**

Completed applications must be returned to the High School Guidance Office by _____

NAME CIRCLE ONE (MS. / MR.)

ADDRESS

CITY, STATE ZIP

HOME PHONE

CELL PHONE

E-MAIL

SOCIAL SECURITY NUMBER

GPA

GRADUATION DATE

AREA OF STUDY

GUIDANCE COUNSELOR'S NAME

PHONE NUMBER

List parents' or guardians' names and e-mail addresses (and street addresses if not same as student):

NAME

NAME

ADDRESS

ADDRESS

HOME PHONE

HOME PHONE

CELL PHONE

CELL PHONE

E-MAIL ADDRESS

E-MAIL ADDRESS

Include in following order:
___ Application
___ Essay
___ Activity Sheet
___ Reference Letters
___ Transcript
___ Parents' Tax
___ Return(s) (if required)

List all siblings and household dependents. Give age, college, or occupation:

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Name of institutions to which you have applied:

| | | | |
|-------|--------------|---------------|---------------|
| _____ | Pending ____ | Accepted ____ | Enrolled ____ |
| _____ | Pending ____ | Accepted ____ | Enrolled ____ |
| _____ | Pending ____ | Accepted ____ | Enrolled ____ |
| _____ | Pending ____ | Accepted ____ | Enrolled ____ |

Housing plans: On Campus ____ Off Campus ____

What are your career goals?

Give details regarding other scholarships, grants, or loans you are seeking or have already received. Include amount.

Please attach a separate sheet listing the following information by year, along with an approximate number of hours per week or month spent participating in each activity:

- Participation in varsity, junior varsity, and/or community teams
- Memberships and participation in school organizations and activities
- Leadership roles/elected offices
- Awards received
- Volunteer experience and number of hours involved
- Membership and participation in community organizations
- Employment experience

Please indicate any unusual or personal circumstances you feel warrant attention:

If circumstances involve financial changes please include a copy of the most recent pay stub to show difference from last tax year.

Where did you hear about the Williamsport Lycoming Community Foundation scholarship funds?

Guidance Office ____ Newspaper ____ Website ____ Other _____

Essay

Please refer to specific criteria of the scholarship for which you are applying. Keep in mind that this is the only component of the application that allows you to tell the selection committee something about yourself; **creative responses are encouraged**. Please submit in typed, double spaced format.

Reference Letter

Please provide reference letters from someone familiar with your goals and attributes. Consider asking a current or former teacher, coach, employer, principal, clergy member, volunteer supervisor, neighbor or family friend. References from guidance counselors are not encouraged unless you have a unique relationship. Avoid reference letters that are too vague, generic or written for a purpose other than securing a Community Foundation scholarship.

Parents' Tax Return(s)

Please refer to specific criteria of the scholarship for which you are applying. If required, include parents' most recent tax return(s). If parents do not file a joint return please include both parents' returns.

Transcript

Please attach a copy of your transcript that includes class rank, GPA, SAT or ACT score.

Financial Information/Certification
Signatures are required

I hereby affirm that the information on this form is true and complete to the best of my knowledge. I am aware of the conditions under which the awards are made and promise to inform the Williamsport Lycoming Community Foundation of any change in circumstances.

I understand that tax return forms provide information to be used in the consideration of finalists for awards made by the Williamsport Lycoming Community Foundation. The information submitted is held in strictest confidence.

I hereby authorize the Williamsport Lycoming Community Foundation to share this information with members of the Scholarship Committee.

APPLICANT'S SIGNATURE

PARENT OR GUARDIAN'S SIGNATURE

DATE

DATE

Return to: High School Guidance Office

Questions: Contact the High School Guidance Office
or Betty Gilmour, Program Officer, at the Williamsport Lycoming Community Foundation
E-mail bettyg@fcfpa.org
Phone (570) 321-1500

All scholarships are for graduating high school seniors. All scholarships are paid directly to the higher institution of education.

_____ **Carl and Lucille Jarrett Scholarship Fund – 5 awards**

Selection Criteria:

- Accepted, part-time or full-time, at an accredited 2- or 4-year institution of higher education
- Exhibits good citizenship, are honest and have integrity
- Shown through job or volunteer history an ability to succeed, be self-motivated and have strong ethics

_____ **Robert & Judy More Scholarship Fund**

Selection Criteria:

- Accepted, full-time, at an accredited institution of higher education, preferably in Pennsylvania
- Exhibits leadership qualities, academic excellence and a cooperative spirit
- Preference will be given to students pursuing higher education in the areas of finance, engineering, business or science
- Other than a strong potential for success, such factors as class rank and grade point average will not be criteria in making a selection unless in the judgment of the selection committee such factors are needed to distinguish between multiple potential candidates