

Scholarship Application

Application due date: April 30, 2023

Armstrong County Herb Group Scholarship 2023

1. DEADLINE for scholarship applications is *April 30, 2023* (NO EXCEPTIONS)
2. Refer to application process below for a list of the supporting documents needed (i.e., reference forms, evidence of GPA, etc.) Incomplete applications will not be considered.
3. If any question does not apply to you in this application please put N/A in the space.
4. Type or print legibly. Illegible applications will be returned to you.
5. You will be notified by phone or mail by May 15, 2023 regarding the status of your application.
6. If you have any questions about the application, contact us by email at JenWillyard@gmail.com

FINANCIAL ASSISTANCE is based on academic performance, leadership potential, and future participation in forestry, State Parks ranger, Earth sciences: educational, environmental, conservation, agricultural, nutritionist/ dietician, Science teacher (Vo Ag Tech school) and Natural Studies

SCHOLARSHIP AWARDS

The Armstrong County Herb Group awards scholarships on the basis of a comprehensive process. Areas that are reviewed by the committee include, but are not limited to the following: *Academic Accomplishments, Community Service, References, and Personal Essay*. Scholarship funds are paid directly to the recipient.

CRITERIA

- Applicants must have permanent residence status in Armstrong County, PA, attend one of the High Schools of the County of Armstrong *and must be a permanent resident of the United States*.
- Applicants must be completing high school successfully with a minimum unweighted GPA of 3.0 on a 4.0 scale.
- Applicants must be accepted as a full time student at a *college, university, or trade school* program for the Fall 2023 academic semester.
- Applicants must complete and submit a Scholarship Application postmarked by April 30, 2023.
- Applicants must complete a minimum 250 word essay on why they should be considered for this scholarship.

TIMELINE

- Applications are due **April 30, 2023**
- Applicants are notified if awarded a scholarship by May 15, 2023

Application Process

SCHOLARSHIP APPLICANTS MUST PROVIDE:

- Completed application form.
- Official high school transcript in a sealed envelope from the institution.
- Two letters of recommendation.
- Proof of acceptance at an academic, vocational or technical school for post-secondary studies.
- A minimum 250 word essay.
- A letter of acceptance from the college or university or proof of enrollment

SCHOLARSHIP AWARDS

- Award notification will be given by May 15, 2023

Deadline for the application is SUNDAY, APRIL 30, 2023. Applications postmarked after this date will not be considered.

Please submit application to your guidance counselor or email them to:

Armstrong County Herb Group Scholarship Program
JenWillyard@gmail.com

Application 2023-must be filled out by applicant.

Please type or print your answers below. A separate sheet may be used if needed. If application is illegible it will be returned to you.			
1	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none; padding: 5px;">Last Name: _____</td> <td style="width: 50%; border: none; padding: 5px;">First Name: _____</td> </tr> </table>	Last Name: _____	First Name: _____
Last Name: _____	First Name: _____		
2	Mailing Address:: Street: _____ City: _____ State: _____ ZIP: _____		
3	Daytime Telephone Number: () _____ Email address: _____		
4	<table style="width: 100%; border: none;"> <tr> <td style="width: 75%; border: none; padding: 5px;">Current High School: _____</td> <td style="width: 25%; border: none; padding: 5px;">High School Graduation date: _____</td> </tr> </table>	Current High School: _____	High School Graduation date: _____
Current High School: _____	High School Graduation date: _____		
5	I will be attending the following school in the <u>Fall of 2023</u> : _____ Address/ Phone _____		
6	Will you be a full time student? _____ (minimum 12 hrs.)		
7	Will you be a commuting student? Will you live on campus? _____ If you are not living on campus, where will you be living? _____		
8	Grade Point Average (GPA): _____ (On a 4.0 scale) Attach proof of GPA; your most recent official school transcript required.		

9	ACT Score: _____ Or SAT Score: _____												
10	Name & address of parent(s) or legal guardian(s): Use reverse side of application if you need more space. Name (s) _____ Street: _____ City: _____ State: _____ ZIP: _____ Home phone of parents or legal guardians: _____												
11	What specialty/major do you plan to major in as you continue your education?												
12	List other financial assistance you will receive per semester or quarter:												
	<table border="1"> <tr> <td data-bbox="139 982 215 1020">A.</td> <td data-bbox="215 982 1019 1020">Personal: (currently working or work /study during school)</td> <td data-bbox="1019 982 1567 1020">Amount: \$</td> </tr> <tr> <td data-bbox="139 1020 215 1058">B.</td> <td data-bbox="215 1020 1019 1058">Other Scholarship(s):</td> <td data-bbox="1019 1020 1567 1058">Amount: \$</td> </tr> <tr> <td data-bbox="139 1058 215 1096">C.</td> <td data-bbox="215 1058 1019 1096">Grants:</td> <td data-bbox="1019 1058 1567 1096">Amount: \$</td> </tr> <tr> <td data-bbox="139 1096 215 1129">D.</td> <td data-bbox="215 1096 1019 1129">Student Loan(s):</td> <td data-bbox="1019 1096 1567 1129">Amount: \$</td> </tr> </table>	A.	Personal: (currently working or work /study during school)	Amount: \$	B.	Other Scholarship(s):	Amount: \$	C.	Grants:	Amount: \$	D.	Student Loan(s):	Amount: \$
A.	Personal: (currently working or work /study during school)	Amount: \$											
B.	Other Scholarship(s):	Amount: \$											
C.	Grants:	Amount: \$											
D.	Student Loan(s):	Amount: \$											

Please list the following information on a separate sheet if needed.

13	SCHOOL EXTRA-CURRICULAR ACTIVITIES: Please list school extra-curricular activities in which you have participated. Note leadership roles and dates.
14	ORGANIZATIONS: Please list community organizations such as service, volunteer and religious organizations in which you are now active or have previously been active. Note leadership roles and dates.
15	RECOGNITIONS: Please list important awards and recognitions received. Note organizations presenting honor and date.

16	GOALS: What are the short and long term goals for your life?		
17	NEED: Please explain your need for the Armstrong County Herb Group Scholarship		
18	<p>A. The following criteria must be met in order for the application to qualify to be reviewed by the scholarship committee.</p> <p>B. Your application will be returned to you if these items are not attached to this application. (No exceptions.)</p> <p>C. Circle "YES" or "NO" to be sure you have completed and attached each item as required.</p>		
	YES	NO	Application complete
	YES	NO	Two reference forms. Your references should be in separate sealed envelopes
	YES	NO	Proof of college acceptance or current student enrollment. A letter of college enrollment or program enrollment is required for receipt of funds.
	YES	NO	Most recent <u>official</u> high school transcripts Photocopies of your transcript are <u>not acceptable</u> .
	YES	NO	250 word essay on <u>Why you should be considered for the Armstrong Herb Group Scholarship</u>

STATEMENT OF ACCURACY

I hereby affirm that all the above stated information provided by me to the Armstrong County Herb Group Scholarship Committee is true, correct and without forgery. I also consent that my picture may be taken and used for any purpose deemed necessary to promote the Armstrong County Herb Group Scholarship Program.

I hereby understand that if chosen as a scholarship winner, I must provide evidence of enrollment/registration at the post-secondary institution of my choice before scholarship funds can be awarded.

Signature of scholarship applicant: _____ Date: _____

**The deadline for this application must be
Postmarked by April 30, 2023 No exceptions**