

The Deever Family Scholarship for Education is for students pursuing a degree in early childhood, primary or secondary education with focus on the core subjects of English/writing, science, mathematics, social studies, foreign language or special education. Applicants must be graduating seniors of St. Clairsville High School, who participated in a team or individual sport. The scholarship will be awarded based on financial need to a student not necessarily at the top of the class. The recipient must enroll at a college or university in Ohio, Pennsylvania, or West Virginia.

Award: A \$4,000 award divided equally over four years of study. A renewal application must be completed and submitted on an annual basis.

Deadline: February 21, 2020 (Return completed application to Guidance Department)

CHECKLIST

- Essay (typed 250-500 words) addressing the following prompt: How has participation in sports made you a better student and enhanced your school experience?
- Student Aid Report (SAR) – attach a copy of page that shows the Expected Family Contribution (EFC)
- High School Transcripts – attach a copy of transcript showing most recently completed grading period
- Principal Endorsement

STUDENT INFORMATION

Name _____

Address _____

Street/PO Box _____ City _____ State _____ Zip _____

Telephone _____ Email _____

US Resident yes no Date of Birth _____

Sports played at St. Clairsville High School

_____	_____
_____	_____
_____	_____

Cumulative GPA _____ Composite ACT Score _____ SAT Score _____

Deever Family Scholarship for Education

UNIVERSITY INFORMATION

College you plan to attend this fall _____

Have you been accepted yes no

Intended Major _____

Enrollment Status full-time (12+ hours) part-time (6-11 hours)

PARENT/GUARDIAN INFORMATION

Total household income in 2018 _____

Number of family members in household _____

Number of children in college for 2020-2021 academic year _____

CERTIFICATION

I, the student, completed this application and certify that the information provided in this application is complete and accurate to the best of my knowledge. I understand that falsification of information will result in termination of any scholarship awarded. I certify that I have read the instructions and will comply with all requests for documentation for financial need and academic status. Should I receive a scholarship, I will notify the CFOV of any change of plans, and the CFOV may use my name and likeness in publicity materials related to the CFOV.

Signature

Date

Parent or Guardian Signature
(if applicant is under 18)

Date

Principal Endorsement

Date