

## N. Elizabeth Elbin Memorial Scholarship

A scholarship for the benefit of worthy and deserving graduates of Cameron High School, who plan to attend or are attending a junior college, college or university. The scholarship provides for students to receive \$1250 annually while they are enrolled as a full-time student. The maximum award per student will be \$5000. The scholarship terminates once a degree has been awarded.

## **Application Checklist**

1226 Chapline Street Wheeling, WV 26003

\*applications must be received by February 17\*

Application Deadline: February 17, 2021

**Application Guidelines** – Carefully read this page to ensure your application is complete. **Please complete the application as presented. Do not include materials that are not requested.** 

### **CHECKLIST**

	<b>Activities Form</b> – Please use the included form to provide information on Extracurricular Activities, Awards and Honors, Community and Volunteer Activities, and Work Experience. <i>Do not attach resumes or other similar documents.</i>
	Financial Form – Please include requested documentation.
	<b>Letter of Recommendation</b> – Ask evaluator to complete form and return to you in a sealed envelope with evaluator's signature. Include the recommendation with all other application materials. <i>Parents, immediate family members or school counselors are NOT eligible to write the letter of recommendation.</i>
	<b>Academic Certification Form</b> – Have appropriate school official complete form and return it with other application materials.
	Personal Essay – Please attach a personal essay.
Mailing	g Address/Office Location:
	CFOV

## Application Form: N. Elizabeth Elbin Memorial Scholarship

## **PERSONAL INFORMATION** Name: Permanent Address: \_\_ **Street or PO Box** City State Zip What county do you live in? \_\_\_\_\_\_ U.S. Resident? \[ Yes \scalering No Date of Birth: \_\_\_\_\_/\_\_\_\_ Telephone: Day (\_\_\_\_\_) \_\_\_-Email: \_\_\_\_\_ **ACADEMIC INFORMATION** Name of high school: Name of school counselor: High School Phone Number: (\_\_\_\_\_\_\_ **UNIVERSITY INFORMATION** Name of college/university in which you plan to enroll: City State Name Have you been accepted? ☐ Yes ☐ No Will you be full-time (12 or more credit hours) this fall? \(\subseteq\) Yes \(\subseteq\) No Anticipated major or area of study: Do you plan to live: ☐ on campus ☐ off campus ☐ commute ☐ unknown If a West Virginia resident, do you meet the eligibility criteria for the WV Promise Scholarship?

☐ Yes ☐ No

# **Activities Form**

Please list extracurricular, community and personal activities in which you have participated during your high school experience. Include clubs, debate, school sports, student government, fine arts, volunteer work, youth programs, athletic programs, music, scouting, etc. If your involvement in any of the categories exceeds available space, please consider including those that make you most proud. **DO NOT INCLUDE ATTACHMENTS.** 

Extracurricular Activities	Year				Position Held	
	Fr	So	Jr	Sr		
				1		
Community/Volunteer Activities			ar		Position Held	
	Fr	So	Jr	Sr		
Awards and Honors	Year				Comments	
Awards and Honors	Fr	So	Jr	Sr	Comments	
	ГІ	30	JI	31		
			· · · · · · · · · · · · · · · · · · ·			
Work Experience	Dates of Employment			Position Held		
·	20100 01 2111-101111111					

# **Recommendation Letter**

Signed and sealed letter must accompany this application.					
Name:					
Relationship:					
the review of your character. Select someone	ommendation, select someone who will be thorough in who knows you well and will be able to give a candid and nust be completed by someone other than your parents,				
·	ment as to why he or she thinks you are most deserving on of this scholarship (worthy and deserving Cameron				
Personal Essay					
On a separate sheet of paper, please take the grammatically correct personal essay. The essay					
• • • • • • • • • • • • • • • • • • •	efit worthy and deserving students from Cameron High chievement and commitment to school/community. nding of the scholarship's intentions.				
	o and prepare this essay. In writing about something that self that will provide invaluable information during the				
I, the student, completed this application and and true to the best of my knowledge.	certify that all information contained within is correct				
Signature	Date				

## Letter of Recommendation Form

Application Deadline: February 17, 2021

**To Evaluator:** The applicant is applying for a scholarship with the Community Foundation for the Ohio Valley, Inc. Your evaluation is needed as part of the application process. The student has authorized you to release any information you feel would be helpful in reviewing his/her application. Your cooperation in providing this information is important to the selection of award recipients. To maintain confidentiality, please return this form and your letter to the student in a sealed envelope with your signature across the seal. Your statement describing the applicant's character, school, and community leadership abilities, potential to succeed, and evidence of the student's strengths and weaknesses should not exceed one page.

Remember, this scholarship is intended to benefit worthy and deserving students from Cameron High School who exhibit financial need, academic achievement and commitment to school/community. Your letter should demonstrate your understanding of the scholarship's intention and how the applicant reflects those intentions.

I am writing this evaluation on the behalf of	
Evaluator's Name:	
Telephone Number: ()	
Relationship to applicant:	
How long have you known the applicant?	
An evaluation received with a broken seal will be rejected. Please be sure to seal and sign the envelope and retu	rn
to applicant in order that it may be included along with the application packet. Remember – parents, immediate	
family members and school counselors are not eligible to write the evaluation.	

## **Financial Form**

This scholarship is intended to benefit a student who has demonstrated financial need. In order to assist the selection committee in honoring the donor's wishes, please attach the following to your application:

#### **Documentation:**

Please include the page of the FAFSA Student Aid Report that provides your Expected Family Contribution (EFC).

This is the ONLY page you need. Please do not include the full Student Aid Report or copies of tax returns.

If you wish, you may include a supplementary statement explaining circumstances that may impact financial need that are not apparent from the above financial information. For example, contributions expected/not expected from a non-custodial parent, educational expenses of siblings, medical expenses, etc.

### **Certification:**

I (we) certify that all the information on this form is true and complete to the best of my (our) knowledge. If asked by an authorized official of the Community Foundation for the Ohio Valley, Inc. I (we) agree to give documentation for the information given on this form. I (we) realize that failure to comply with a request for further information may prevent the applicant from receiving aid.

Applicant Signatu	re		
Parent Signature		 	

# Academic Certification Form - Read Carefully!

Person completing this form: \_\_\_\_\_\_

This form replaces the need for a transcript and is to be completed by your counselor or other personnel authorized by the counselor.

Submit this form to your counselor for completion, be sure the reported information includes the first

semester. Student's Name: School: Current Class Rank: \_\_\_\_\_ Current Cumulative GPA: SAT Scores (single test date) **ACT Scores (single test date)** Date of Test: Date of Test: \_\_\_\_\_ Verbal: English: Math: Math: Combined: Reading: Science: Composite:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_