Frank Ferguson Memorial Scholarship

The mission of the Frank Ferguson Memorial Scholarship is to provide financial assistance to a graduating senior of Brooke High School.

Candidates may apply or be nominated by someone else, such as: a fellow student, friend, teammate, teacher, employer, pastor, coach, etc.

Application Checklist

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.

Eligibility Requirements:

☐ Graduating senior at Brooke High School
☐ Minimum 3.0 cumulative GPA
☐ Should possess character attributes including, but not limited to: leadership, courage, sportsmanship, faith, volunteerism, selflessness and humility

Checklist:

☐ Activities Form – Please use the included form to provide information on Extracurricular Activities, Awards and Honors, Community and Volunteer Activities, and Work Experience. Do not attach resumes or other similar documents.

☐ Letters of Recommendation – Ask two evaluators, one being a teacher, to complete form and return to you in a sealed envelope with evaluator’s signature. Include the recommendations with all other application materials. Parents, immediate family members or school counselors are NOT eligible to write the letter of recommendation.

☐ Academic Certification Form – Have appropriate school official complete form and return it with other application materials.

☐ Personal Essay – Please attach a personal essay that speaks to the intention of this scholarship, which is detailed within the application.

Mailing Address/Office Location:

CFOV
1226 Chapline Street
Wheeling, WV 26003

*applications must be received by February 17*
Application: Frank Ferguson Memorial Scholarship

PERSONAL INFORMATION

Name: ____________________________________________________________

Permanent Address: ______________________________________________________

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<th>Street or PO Box</th>
<th>City</th>
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<th>Zip</th>
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What county do you live in? _______________________ U.S. Resident? □ Yes □ No

Date of Birth: ______/_______/_______ Telephone: (______) _______-

Email: ____________________________________________________________

Are you available to speak or meet with the selection committee? □ Yes □ No

If you are nominating someone, please provide the following information:

Your Name __________________________________________________________

Phone Number ___________________________ Email ______________________

Are you available to speak or meet with the selection committee? □ Yes □ No

UNIVERSITY INFORMATION

Name of college/university in which you plan to enroll:

____________________________________________________________________

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Have you been accepted? □ Yes □ No

Will you be full-time (12 or more credit hours) this fall? □ Yes □ 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.**

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<th>Extracurricular Activities</th>
<th>Year</th>
<th>Position Held</th>
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<th>Community/Volunteer Activities</th>
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<th>Awards and Honors</th>
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<th>Dates of Employment</th>
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Recommendation Letters – **Two are required**

*Signed and sealed letter must accompany this application.*

**Letter 1**
Name: 
Relationship: 

**Letter 2**
Name: 
Relationship: 

When selecting someone to complete your recommendation, select someone who will be thorough in the review of your character. Select someone who knows you well and will be able to give a candid and unbiased evaluation. Your recommendation must be completed by someone other than your parents, immediate family or school counselors. *Remember, one letter must be from a teacher*.

The evaluator should also provide a brief statement as to why he or she thinks you are most deserving of the scholarship, being mindful of the intention of this scholarship. *(Remember, this scholarship is in memory of Frank Ferguson and is for the benefit of a student entering his/her first year of college who exemplifies many of the following characteristics – leadership, courage in facing life’s challenges, sportsmanship, selflessness/generosity of spirit, humility, scholarship and passion for learning, abiding faith and volunteerism. Your letter should demonstrate your understanding of this scholarship’s intention and how the applicant reflects those intentions.)*

**Personal Essay**

Please take the time to prepare a well-developed, well-written, grammatically correct personal essay. The essay should be no more than two typed pages.

*Remember, this scholarship is in memory of Frank Ferguson and for the benefit of a student entering his/her first year of college who exemplifies many of the following characteristics – leadership, courage in facing life’s challenges, sportsmanship, selflessness/generosity of spirit, humility, scholarship and passion for learning, abiding faith, school and/or community extracurricular involvement and volunteerism. Your essay should demonstrate your understanding of this scholarship’s intention and you reflect those intentions.)*

In general, there is no “correct” way to develop and prepare this essay. In writing about something that matters to you, you will convey a sense of yourself that will provide invaluable information during the evaluation process.

I, the student, completed this application and certify that all information contained within is correct and true to the best of my knowledge.

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 in memory of Frank Ferguson and is for the benefit of a student entering his/her first year of college who exemplifies many of the following characteristics—leadership, courage in facing life’s challenges, sportsmanship, selflessness/generosity of spirit, humility, scholarship and passion for learning, abiding faith and volunteerism. Your letter should demonstrate your understanding of this 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 return 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.
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Academic Certification Form – Read Carefully!

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: ______________

Person completing this form: ____________________________________________
Title: ____________________________________________
Signature: ____________________________________________ Date: ______________
