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The Joseph M. and Annale R. Wells Scholarship will be awarded to a graduate of a Wetzel County high school and/or a resident of Wetzel County, West Virginia. The scholarship will be awarded to a full-time student attending any accredited college or university who is pursuing an associate degree, bachelor's degree, or postgraduate degree. Students who apply for the scholarship are required to demonstrate a high level of academic achievement, 3.0 or higher GPA on a 4.0 scale, evidence of leadership in the community, and evidence of service to others in the community. Students must prove financial need based on family income level.

**Award:** The scholarship is a single award of \$1,000. The scholarship may be renewed with a yearly application, there is no automatic renewal. The award must be used solely for tuition, fees, books, and/or room and board on campus.

**Deadline:** February 17, 2021

Return completed application to CFOV, 1226 Chapline Street Wheeling, WV 26003  
*(\*applications must be received by February 17\*)*

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**CHECKLIST – please complete application as presented and only include requested attachments**

- Essay** (typed, 250-500 words) addressing the following prompt
  - ❖ Describe your goals, include why you are applying for this scholarship and how the funds would make a difference in your educational journey. *Please put your name in the upper right corner of each page.*
- Activities Form**
  - ❖ Use the included form to provide information on extracurricular activities, awards and honors, community and volunteer activities, and work experience.
- Current or Most Recent Transcript (in sealed envelope)**
  - ❖ High School Seniors should submit a high school transcript with test scores (SAT, ACT, AP)
  - ❖ College students should submit a college or university transcript
- Letters of Recommendation Form – one is required (in sealed envelope)**
  - ❖ Ask one evaluator to complete the form and return it to you in a sealed envelope, recommendations must be included with application packet.
  - ❖ The recommendation could be from a teacher, guidance counselor, coach, pastor, supervisor, or other qualified individual. *Be mindful when selecting the recommender – choose someone who can speak to your qualities and characteristics.* Recommendations should NOT be from a parent or immediate family member.
- Financial Information Form**
  - ❖ Complete the form as instructed

# The Joseph M. and Annale R. Wells Scholarship Fund

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## STUDENT INFORMATION

Name \_\_\_\_\_

Address \_\_\_\_\_  
Street/PO Box City State Zip

Telephone \_\_\_\_\_ Email \_\_\_\_\_

US Resident  Yes  No Date of Birth \_\_\_\_\_

High School \_\_\_\_\_

Cumulative GPA \_\_\_\_\_ Composite ACT Score \_\_\_\_\_ SAT Score \_\_\_\_\_

***\*Please be sure to include your most recent transcript***

## UNIVERSITY INFORMATION

College you are attending or plan to attend \_\_\_\_\_

Have you been accepted  Yes  No

Intended Major \_\_\_\_\_

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

## 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 related publicity materials.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian Signature  
(if applicant is under 18)

\_\_\_\_\_  
Date

The Joseph M. and Annale R. Wells  
Scholarship Fund

## Activities Form

Please list extracurricular, community and personal activities in which you have participated during your **current academic 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	
Community/Volunteer Activities	Year				Position Held
	Fr	So	Jr	Sr	
Awards and Honors	Year				Comments
	Fr	So	Jr	Sr	
Work Experience	Dates of Employment				Position Held

## The Joseph M. and Annale R. Wells Scholarship Fund

### 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 respond where appropriate and 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.

**Supplemental Information:**

If you wish, you may include a supplemental 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.

## The Joseph M. and Annale R. Wells Scholarship Fund

### Recommendation Letter –

*One is required and should be from a person who is able to comment thoroughly on your character and how you best reflect the elements being measured by the selection committee (academics, community service and leadership). This signed and sealed letter must accompany this application.*

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.** 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 for the benefit of a student who is academically accomplished and demonstrates community service and leadership.)**

### 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.

***Topic: Describe your goals, why you are applying for this scholarship and how this scholarship would assist your educational journey. Your essay should demonstrate your understanding of this scholarship's intention and how 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.

The Joseph M. and Annale R. Wells  
Scholarship Fund

## 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 for the benefit of a student who is academically accomplished and demonstrates community service and leadership. 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 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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