

**ROCK COUNTY GENEALOGICAL SOCIETY
2024 SCHOLARSHIP GUIDELINES**

*Purpose: The Rock County Genealogical Society (RCGS) has established a scholarship fund to provide educational opportunities for a Rock County High School graduate, who is furthering their education at any **Wisconsin** two (2) or four (4) year college/university.*

AMOUNT: A scholarship of \$1,000 will be granted for one year.

ELIGIBILITY:

1. Applicant must be a Rock County resident and a high school senior or recent graduate.
2. Applicant must have enrolled, for 2024 fall classes, in any **Wisconsin** two or four year college.
3. Multiple students from the same family may apply concurrently for the scholarship.

APPLICATION PROCEDURE:

Step 1: Complete the formal RCGS application for scholarship (pages 2 & 3).

Your application **must** also include the following:

- A **transcript** to document that the applicant is in school, or a certificate of graduation if graduation occurred in December.
- **Two letters of recommendation** from non-family members who are familiar with the applicant's achievements.
- A **short essay** on one of your family's historical events or individuals. How did your family event or individual impact your life today?
- Complete *to the best of your ability*, the **Family Tree 4-Generation Pedigree chart** (See page 3 of 3). Ask your family members for assistance and fill in as much as you can. Use First, Middle and Last or Maiden name(s). (NOTE: this chart will be shared with and/or provided to the RCGS Library.)
- List any **community service** you have provided, during your high school years. [A chart works best.]

Step 2: All paper work must be submitted or postmarked, **no later than March 31, 2024**, to:

Rock County Genealogical Society
Attention: Scholarship Chairperson
PO Box 936, Janesville, WI 53547-0936

DEADLINE: Friday, March 31, 2024.

SELECTION: The RCGS Committee will review the student's application, transcript, recommendations, personal essay, community service and family chart. The Committee will make a recommendation to the RCGS Board of Directors. The RCGS board will make the final selection. The Scholarship Award check will be forwarded to the winner's school account once RCGS receives proof of enrollment.

Thank you for your interest, and our very best wishes for success in your future endeavors.

ROCK COUNTY GENEALOGICAL SOCIETY

RCGS Phone: 608-580-0149 [Wednesday-Friday 10 AM - 3 PM]

RCGS Email: rcgs.library@gmail.com

ROCK COUNTY GENEALOGICAL SOCIETY - SCHOLARSHIP APPLICATION

Name: _____ Birth date: _____

Address: Street, City, ST, Zip:

Telephone Number: _____ E-Mail Address: _____

Some essays may be published online on the RCGS website.

I give permission for RCGS to publish my essay online. _____

Please sign above.

School Currently Attending: _____ Phone Number: _____

Name of anticipated **Wis** College you will be attending:

College ID # of Applicant [if known]: _____ Proof of Enrollment _____

College Address: _____

College Phone Number: _____ College FAX Number: _____

Signature: _____ **Date:** _____

Note: The RCGS Scholarship check will be forwarded to the selected applicant's school account – once proof of enrollment for Fall 2024 classes has been received by RCGS.

[Please leave blank below double line.]

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Rock County Genealogical Society Scholarship Committee use only

	% value	Received	Date received
Application	10 %		
Transcripts	15%		
Recommendations	15%		
Essay	30%		
Community Service	20%		
Family Tree Chart	10%		

RCGS Scholarship Application Reviewed by: _____ on: _____

Application found to be in good standing: YES NO by: _____ on: _____

Scholarship money given to applicant: YES NO by: _____ on: _____

RCGS Treasurer's Name: _____ Signature: _____



You

Name: _____

b. _____

p. _____

Key

b = date of birth, ex. 15 Jul 1952

m = date of marriage

d = date of death

p = place event, ex. Janesville, WI

Father

Name: _____

b. _____

p. _____

m. _____

p. _____

d. _____

p. _____

Mother

Name: _____

b. _____

p. _____

d. _____

p. _____

Grandfather

Name: _____

b. _____

p. _____

m. _____

p. _____

d. _____

p. _____

Grandmother

Name: _____

b. _____

p. _____

d. _____

p. _____

Grandfather

Name: _____

b. _____

p. _____

m. _____

p. _____

d. _____

p. _____

Grandmother

Name: _____

b. _____

p. _____

d. _____

p. _____

Great grandfather

Name: _____

b. _____

d. _____

Great Grandmother

Name: _____

b. _____

d. _____

Great grandfather

Name: _____

b. _____

d. _____

Great Grandmother

Name: _____

b. _____

d. _____

Great grandfather

Name: _____

b. _____

d. _____

Great Grandmother

Name: _____

b. _____

d. _____

Great grandfather

Name: _____

b. _____

d. _____

Great Grandmother

Name: _____

b. _____

d. _____

Rock County Genealogical Society Scholarship Application

Family Tree Chart: Please add dates and place names if you know them.