GRACE S. DAVIS SCHOLARSHIP

REQUIREMENTS:

You must live or have lived in Magnolia Township (McNabb and Magnolia area) or Hope Township (Lostant Area) for ten years;
Maintain full-time student status;
Good Scholastic Ability;
Good Moral Character;

FOR:

Freshman Sophomore, Junior and Senior College students

WHOM TO CONTACT:

Grace S. Davis Scholarship Trust
c/o Christina Whitney, Trustee
1552 Meridian Rd
Magnolia, IL. 61336
Cmwhitney07@gmail.com

HOW TO APPLY: FRESHMAN

1.) ***Upon graduation from high school, a letter, must be presented to the Grace S. Davis Scholarship trustee requesting that they be considered for this scholarship by April 1st.*** In this letter, inform the trustee of your college choice and college major and any other information that you may want to include.
2.) ***Application form***
3.) ***Transcripts from High School attended***

HOW TO APPLY: SOPHOMORE, JUNIOR, SENIOR

1.) FOR EACH Fall Semester/Spring Semester , a letter must be sent to Trustee requesting that they be considered for the scholarship by July 1st.
2.) Transcripts from previous semester
3.) Class schedule for upcoming semester.

Monies sent for the year are split per semester and given upon information from the student. This scholarship can be applied for each of the first 4 years of college.

ABOUT GRACE S. DAVIS:

Grace S. (Swindler) Davis was born and raised on a farm near Magnolia, Illinois. She attended the University of Michigan, majored in classical languages, and earned a Phi Beta Kappa Key. She was a Latin teacher in the Chicago Public school system her whole career. Ms. Davis was an ardent believer in the civilizing and social value of education. At her death in 1947, her Will stated that her assets were to be placed in trust, and that the income from this trust be used primarily for college scholarships for students residing in Hope and Magnolia Townships. Many students past and future have and will benefit from her generosity.

Christina Whitney, TRUSTEE
GRACE DAVIS SCHOLARSHIP
1552 Meridian Rd
Magnolia, IL. 61336
815.712.1347
Cmwhitney07@gmail.com

APPLICATION FOR THE GRACE DAVIS SCHOLARSHIP

PLEASE FILL IN THE FORM BELOW. THE COMPLETED FORM MAY BE SENT TO THE ABOVE ADDRESS OR EMAIL ADDRESS.

NAME OF APPLICANT: _____
Last Name First Name MI

ADDRESS OF APPLICANT: _____
Street Box #

_____
City State Zip Code

HOW MANY YEARS AT THE ADDRESS ABOVE: _____

EMAIL ADDRESS: _____

DATE OF BIRTH: _____

DATE OF HIGH SCHOOL GRADUATION: _____

COLLEGE/UNIVERSITY PLANNING ON ATTENDING: _____