2025The NORTHWEST DISTRICT OAPSE Scholarship Program is a program of scholarships available to children whose parent or legal guardian is a member in good standing of the Ohio Association of Public School Employees/AFSCME Local #4 AFL-CIO. Under the program, each scholarship awarded to the winner(s) will be selected from the applicants who meet the eligibility requirements. **If an applicant receives a 2 year or more full paid scholarship or grant, he/she shall be ineligible to receive the NORTHWEST DISTRICT OAPSE SCHOLARSHIP.**

WHO MAY APPLY:

Any graduating high school senior who is a daughter or son of an active OAPSE member or whose legal guardian is an active OAPSE member and who intends to enroll in a fulltime degree program in any accredited college, university, business, or technical school is eligible for a scholarship. The scholarship may be used for any field of study.

GOOD LUCK!!!

TO APPLY:

1. Complete the Applicant's section of this form. You may use additional paper, if necessary.

2. Provide two (2) letters of recommendation or other evidence of your character or abilities (not a relative).

3. Write an essay of no less than one (1) typed page and no more than two (2) pages, on the subject "LABOR IN AMERICA". Must be single sided. Attach the essay to the application form.

4. Have your parent or legal guardian complete OAPSE's Parent Section of this form.

5. Attach proof of parent's or legal guardian's membership, a ***COPY of the current OAPSE/AFSCME membership card.***

6. Have your high school complete the High School section of this form. Additional may be used, if necessary. Provide an official copy of your high school transcript, including the 1_{st} semester or trimester of the 12_{th} grade.

7. Submit the results of either the Scholastic Aptitude Tests (SAT) or American College Tests (ACT).

8. Make sure your completed application, with all supportive documentation, is mailed to OAPSE Scholarship Committee, post marked no later than March 3, 2026. Please put all documents in one envelope and mail to.
   ATTEN: Karen Jones
   2446 Starr Ave.
   Oregon, OH 43616

9. Any material post marked after the final date of **March 3, 2026 will be an automatic disqualification.**

TO BE COMPLETED BY THE APPLICANT (Please type or print clearly)

1. Applicant's Name _____
   Address _____
   City _____ Zip _____ Phone (_____) _____

2. Date of Birth (MM/DD/YYYY) _____/_____/_____

3. Graduation Date_____

4. In what activities did you participate in high school?

_____
_____
_____
_____

5. List any offices held or honors received in these activities: _____

_____
_____

6. List any academic honors which you may have received:

_____
_____
_____

7. Indicate Universities, Colleges, Business, or Technical Schools you have been accepted to attend, or applied for acceptance, and any grants or scholarships awarded. Also, include your proposed major.

_____
_____
_____

8. Are your parents assisting any other member(s) of your family to attend college next year? Yes_____ No_____
   If yes, who? _____

9. Are there economic or unique factors that make you especially worthy of receiving support: _____

_____
_____
_____
_____

TO BE COMPLETED BY THE OPASE PARENT OR GUARDIAN:

Name of Parent or Guardian: _____

Address_____

City_____Zip_____Phone (_____) _____

Work Location: _____

Address_____

Phone (_____) _____

OAPSE Local Name and Number_____

(ATTACH A COPY OF YOUR CARD)

Parent or Legal Guardian signature_____

Date_____

Attach a copy of your OAPSE card below

TO BE COMPLETED BY THE SCHOOL

Dear Principal, Counselor or Teacher:

This student is an applicant for a NORTHWEST DISTRICT OAPSE (Ohio Association of Public School Employees) Scholarship. As an aid in the selection process it is necessary that the NORTHWEST DISTRICT OAPSE Scholarship Committee receive the information regarding the student's character, ability and performance sought in this High School Report. The information will be used only by the Committee; additional paper may be used, if necessary. It is very important that this report be completed and returned to the applicant so it can be POST MARKED NO LATER THEN MARCH 3, 2025

ALL DOCUMENTS FOR THIS APPLICATION MUST BE IN ONE ENVELOPE.

Thank you,
N.W. OAPSE Scholarship Committee

(PLEASE TYPE OR PRINT CLEARLY)

1. Name of school _____
2. School address _____
   City _____ State _____ Zip _____

3. Name of Principal _____
4. Length of time you have known this applicant? _____
5. What is your general evaluation of this student? _____
   _____
   _____
   _____
6. Sometimes special circumstances should be considered when evaluating a student's achievement record and test scores. Please specify:
   _____
   _____
7. Other Comments:
   _____
   _____

8. Please include any Scholastic Aptitude Test (SAT) or American College Test (ACT). *Attach a copy*

9. Please attach a transcript of student's grades. Include an explanation of your marking system.

Signature Title or Subject Taught Date

NORTHWEST DISTRICT OHIO ASSOCIATION OF PUBLIC SCHOOL EMPLOYEES SCHOLARSHIP
RECOMMENDATION FORM

(Note to Applicant) Allow two weeks for your reference to complete this form.

I am applying for the NORTHWEST DISTRICT O.A.P.S.E. Scholarship and would like to have you as a reference. Would you please complete and return this form to me so that I may have it **POST MARKED BY MARCH 3, 2026i**

1. How long have you known the applicant and in what capacity?

_____

_____

2. What is your evaluation of the applicant's…

a) Leadership/participation ability? _____

_____

b) Citizenship?

_____

_____

_____

_____

c) Character?

_____

_____

_____

_____

d) Potential to succeed?

_____

_____

_____

_____

3. Are there economic or unique factors that make this applicant especially worthy of receiving scholarship support?

_____

_____

_____

_____

_____

_____

_____

Signature and Title _____ Date_____