

**ELIDA EDUCATIONAL FOUNDATION
SCHOLARSHIP APPLICATION**
DEADLINE: April 1

*****PLEASE MAKE SURE THAT ALL PARTS ARE COMPLETED*****

Part I (to be completed by the Applicant)

Name: _____

Home Address: _____ City: _____ Zip: _____

Phone: _____

Number of Siblings: _____

Number of Siblings Currently in College: _____

Renewal: ____ Yes ____ No If yes, attach a college transcript

Parent's Occupations: Father: _____ Mother: _____

Please write a short paragraph discussing your educational and career goals.

Please write a short paragraph discussing your need for this scholarship.

Outstanding High School Achievement (awards, honors, leadership roles, sports, activities)

Freshman Year:

Sophomore Year:

Junior Year:

Senior Year:

Other activities not school related (volunteer service, church-related, etc.):

List any employers you worked for during the school year and what you used those funds for:

Part II

Please attach a recommendation from an Elida employee AND another recommendation from an employer or other community person not related to you.

Part III

Please ask your guidance counselor to complete the following information:

Elida Grade Point Average : _____

Elida Class Rank: _____ out of _____

Elida Program: _____

Assessment of High School work at Elida:

Estimate of success in furthering education:

Additional Comments:

Guidance Counselor Signature _____

Information for the Student Applicant:

Standards of Selection:

- 1) Rank in upper 25% of class at Elida
- 2) Have a record of performance in activities in school and in the community
- 3) Have a sound interest and positive attitude toward further education
- 4) Complete this application
- 5) Attach two recommendations as indicated in Part II
- 6) Give this application to your counselor to complete Part III
- 7) Participate in a personal interview with the Foundation Committee, if requested