

APPLICATION FORM

Abraham Tappan-Elizabeth Harper Scholarship

Amount \$500.00

Awarded to Graduating High School Senior(s) who are residents of the Unionville Community. Awarded to two students annually (applications permitting), one each from Lake County and Ashtabula County.

This form and required documentation must be submitted to the school counselor for input. Please mail completed applications to:

**Unionville Boosters Club
Attention: Scholarship Committee
P.O. Box 102
Unionville, Ohio 44088-0102**

Please print or type all information.

Applicant Name: _____

Age: _____

Home Phone: _____

Street Address: _____

Mailing Address: _____

Parent(s) Name(s): _____

Address, if different from above: _____

Name(s) & age(s) of siblings, if applicable: _____

Current cumulative Grade Point Average (minimum 2.5 to apply): _____

Have you applied for admission to college? _____

If yes, have you been accepted? _____

What field of study do you wish to pursue? _____

Please list the college(s) where you have been accepted:

Have you saved money for your education? _____

Will your family be contributing to your education? _____

Will you be pursuing other scholarships? _____

Please list any past employment during High School.

Testing scores: ACT: _____

SAT: _____

Other (please specify): _____

Please attach the following items to this application:

1. A statement or 50 words statement, but not exceeding 150 words, providing the reason for pursuing your chosen field of study,
2. Transcripts from High School(s) including grades 9-12 which have been signed by the school counselor,

Abraham Tappan-Elizabeth Harper Scholarship application deadline is April 21, 2017.

STATEMENT OF APPLICANT

If I am granted the Abraham Tappan-Elizabeth Harper Scholarship, sponsored by the Unionville Boosters Club, it is my intention to complete the educational program outlined.

I agree that this application, and all credentials submitted by myself or other on my behalf, will remain the property of the Unionville Boosters Club.

Signature: _____

Date of Application: _____

Scholarship winners will be notified and a check in the amount of \$500.00 will be presented directly to each student at a monthly meeting of the Unionville Boosters Club. Scholarship winners may be asked to assist with community service needs of the Unionville Boosters Club.