

## **Robert and Dorothy Sponsler Memorial Scholarship Application Form**

This scholarship fund has been established in an effort to assist students who wish to further their education. The criteria has been carefully selected to reflect the principles of the order of the Eastern star. It is with great pride that the Family of Robert and Dorothy Sponsler provides this scholarship.

### **Purpose:**

To provide scholarships for qualifying Mercer County High School Seniors who will attend an accredited Vocational School or accredited two or four year college or university during the fall immediately following graduation.

### **Procedure for presentation:**

Scholarships may be awarded each spring at the Mercer County High School awards ceremony.

### **Criteria for acceptance:**

1. Scholarships will be limited to Seniors of the current Mercer County High School graduating class
2. Applicants must have demonstrated positive moral and ethical values in his or her life. Other valued factors include: character, attitude, community service and leadership.
3. Each Sponsler Memorial Scholarship will be presented upon proof of enrollment in either an accredited Vocational School or two or four year accredited college or university.
4. An official Mercer County High School academic transcript must be submitted with the application.
5. Remember to attach your one page profile/personal statement. Include the things you enjoy and the reasons for your choice of a career.
6. Share any unusual circumstances that will make it difficult for you to fund your education. (Use a separate sheet of paper if necessary)
7. All applications must be submitted to the counselor's office on or before the first day of April, of each year, if April 1<sup>st</sup> falls on a weekend the application is due the next school attendance day.

### **Payment of the Scholarship:**

The scholarship funds will be paid directly to the recipient and not to the vocational school, college, university or any other provider of educational services or materials. The funds may be used for any educational expenses.

## Sponsler Memorial Scholarship Form

(Please print or type as you complete all blanks)

Full Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Number of Brothers or Sisters: \_\_\_\_\_

Number of immediate family members now in college: \_\_\_\_\_

What are your professional goals: \_\_\_\_\_

Planned course of study: \_\_\_\_\_

School you plan to attend: \_\_\_\_\_

(Please attach a copy of your acceptance letter if you have received one)

Student's GPA: \_\_\_\_\_ Student's Class Rank: \_\_\_\_\_

Do you work: \_\_\_ Yes \_\_\_ No (If yes, how many hours per month? \_\_\_\_\_)

List extra-curricular activities and volunteer hours on a separate sheet.

Please enclose a copy of your transcript.

## **Sponsler Memorial Scholarship Form**

Please type and enclose a one page profile/personal statement about yourself.

Tell the things you enjoy and the reasons for your choice of a career.

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## Sponsler Memorial Scholarship Form

List the schools you plan to attend

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Cost (tuition, room and board)

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