

Quota Club of Wayne County

Scholarship Guidelines for High School Students

Eligibility

To be eligible for a scholarship, an individual must be a resident of Wayne County, a full-time* student (or expect to be a full-time student within five months of receiving the award), pursuing a degree at an accredited college or university (no less than an associate degree or similar vocational post-secondary course of training at an accredited institution), and admitted to an accredited college or university, pursuing a field of speech and hearing or related field of benefit to the speech and hearing community.

*Full-time status may be waived by the selection committee if the candidate has special circumstances and demonstrates a real need to earn funds to supplement the scholarship. The student must demonstrate the motivation to fulfill the degree requirements on a part-time basis.

Use of Funds

The scholarship check will be made out to the student and the institution designated by the student. The institution must be accredited by the State in which it is located. It is the student's responsibility to be sure the funds are credited to their account through the bursar's office. This award is given in one payment; however, students may reapply annually.

Selection Criteria

The recipient will be selected on objective, non-discriminatory standards on a weighted point system that includes:

- Academics and activities at school and the community.
- Financial need.
- Personality qualities of character, motivation and potential.
- Interest in a speech and hearing related career.

Submission Requirements

Applications must include:

- A typed or neatly written completed application form.
- A personal statement of 500 words or less biography of yourself. Include interests, activities or plans that might be beneficial to our mission. Please include how you or a family member may have been impacted by any speech or hearing issues or experiences.
- Official high school transcripts.
- Personal resume.
- Letters of recommendations from two persons not related to you.

Complete application packets should be given to your high school guidance counselor or sent to Linda Runion Scholarship Chair, 146 E. Liberty Street, #110, Wooster, OH 44691 by **April 1** for consideration for the fall academic year. Late or incomplete submission will not be considered.

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Student Scholarship Application Form

Quota of Wayne County's primary focus is to serve the speech and hearing impaired. The club has a special interest in assisting those pursuing a career in speech and hearing or related fields which will benefit the speech and hearing community. Applications are open to high school students entering college.

Name: _____ Date of Birth: _____

Address: _____

Home Phone: _____ Cell Phone: _____

High School Attending & Graduation Date: _____

Father/Step-father/Guardian:

Mother/Step-Mother/Guardian:

Name: _____

Address: _____

Occupation: _____

Employer: _____

Gross Family Income: _____

Number of dependent children claimed by your parent(s) on Federal Income Tax Return: _____

List Dependents by Name and Age:

Name: _____ Age: _____ Name: _____ Age: _____ Name: _____ Age: _____

Name: _____ Age: _____ Name: _____ Age: _____ Name: _____ Age: _____

Name: _____ Age: _____ Name: _____ Age: _____ Name: _____ Age: _____

Number in college excluding applicant? _____ Number of Other dependents (non-siblings) in home? _____

Anticipated field of study? _____

What career do you hope to pursue? _____

Have you applied to a college or university? no _____ yes _____ If yes, please list name and address of the college or university: _____

Approximate cost for school year including room, board, tuition & books: _____

Grants, scholarships, fellowships, assistantships, loans & other aid already awarded: _____

List awards or honors received while in high school: _____

On a separate sheet of paper, write a brief (500 words or less) biography of yourself. Include interests, activities, or plans that might be beneficial to our mission. Please include how you or a family member may have been impacted by any speech or hearing issues or experiences.

I hereby certify that the above information is correct and that I am not a child or grandchild of a Quota Club member.

Applicant's Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Please return the items listed below to your guidance counselor who will return it to the Quota Club Scholarship Chairperson or mail to Linda Runion, 146 East Liberty Street, Suite 110, Wooster, OH, 44691:

- Quota Scholarship Application Form
- Essay
- Official High School Transcript
- Personal Resume
- Two Letters of Recommendation from two persons not related to you

Complete applications must be received by **April 1** to be considered. Scholarships are generally presented at your high school's senior awards ceremony.