

The Clouse Construction Scholarship Fund Application Guidelines

This scholarship will be awarded to a Seneca County high school senior who is pursuing a post-secondary degree or certification in the academic year immediately following high school graduation. The recipient will be the person who in the judgment of the scholarship trustees has best demonstrated an interest in **Construction Trades or Information Technologies**. Student may be attending a certified trade school or a two or four year program at the college or university of the student's choice. The student may use the Scholarship for tuition, books or fees.

Scholarships in the amount of \$2500 will be awarded annually.

The scholarship committee will consist of the current president or CEO of Clouse Construction Corp., a representative of Clouse Construction Corp., and a faculty member of a local school. No information, except that contained in or relating to the application, will be used in the selection process. The scholarship trustees may verify information presented in the application.

**Completed applications may be submitted to your
guidance counselor
by March 31**

The Clouse Construction Scholarship Fund



Application

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Deadline March 31
Deliver completed application to
Your school counselor

Attachments:

- List of extracurricular activities
- Current transcript of education.
- Letter of recommendation
- Essay describing what you are going to pursue in college and why you have a passion for this chosen field

Name: _____

Address: _____ County: _____

Date of Birth: _____ Place of birth: _____

Home Phone: _____ Cell: _____

Email: _____

Name of Parents/Guardians _____

High School: _____

Year of high school graduation: _____ GPA: _____ ACT &/or SAT: _____

Major/minor: _____ Expected graduation date: _____

Career goal: _____

Other sources of scholarship or financial assistance: _____ Please indicate dollar amount for each.

Work Experiences including high school work-study programs: _____

I am available for an interview with the Scholarship Trustees on the following days and times:

Day of the week:

Time of day available:

I hereby give permission for a scholarship fund advisor to contact any of my teachers, past or current employers, coaches, guidance counselors, or educational or professional schools I have attended for additional information about my scholastic attendance, performance, financial circumstances and references.

I understand that the information set forth in this application may be shared with a scholarship fund advisory committee. I acknowledge that all information contained in this application and attachments is true.
I understand that this application and its attachments will become the property of The Tiffin Community Foundation and will not be returned to me, the applicant.

Applicant's signature Date: _____

Applicant's Parent/Guardian signature Date: _____

Applicant's Parent/Guardian signature Date: _____

For Tiffin Community Foundation Use

Date received: _____ Complete? yes no Contacted applicant: _____

Submitted completed application and attachments to Scholarship Trustees: _____

Recommendation: _____
