

The Tiffin Metal Products Scholarship Fund Application Guidelines

This scholarship will be awarded to a high school senior from Seneca County or another county if the parent is an employee of Tiffin Metal Products, who is pursuing a post-secondary degree or certification in the academic year immediately following high school graduation at a certified trade school, 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.

The recipient will be the person who in the judgment of the scholarship trustees has best demonstrated an interest in manufacturing.

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

The scholarship committee will consist of board members of the Tiffin Community Foundation, The President or CEO of Tiffin Metal Products, A representative of Tiffin Metal Products, and a member of the school organization. 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 Tiffin Metal Products Scholarship Fund
is a component fund of The Tiffin Community Foundation, Inc.
which maintains exclusive legal control.



The Tiffin Metal Products Scholarship Fund



Application

Page 1 of 2

Deadline March 31

Deliver completed application to
Your school counselor

Attachments:

- Completed application form
- Short Essay
- 2 Minute Video

Name: _____

Street Address: _____ County: _____

Date of Birth: _____

Home Phone: _____ Cell: _____

Email: _____

Name of Parents/Guardians _____

High School: _____

Year graduating: _____

Work Experiences or high school work-study programs or volunteer work: _____

College or Trade School you plan on attending: _____

Please submit a 2 minute video, or a short essay on a separate page, about what you are going to pursue in college or trade school and why you are drawn to that field.

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: _____

For Tiffin Community Foundation Use

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

Submitted completed application and attachments to Scholarship Trustees: _____

Recommendation: _____

Questions? Contact:
The Tiffin Community Foundation

31 S. Washington Steet
Tiffin, OH 44883

419.448.1791
567.220.6496 (fax)
info@tiffinfoundation.org