



# Springfield Foundation

For **good.** For **ever.**®

Mary Ellen Shockey Memorial Scholarship for  
Urbana High School Graduates

## 2010-2011 Academic Year

To honor the memory of Mary Ellen Shockey, her family and friends established a scholarship fund to assist graduates of Urbana High School with their post-secondary education. Priority is given to applicants who are planning to pursue studies in medicine or a related field (i.e., allied medicine, psychology, physical therapy, radiology, pharmacy). If there are insufficient qualified medical or related field applicants, the scholarship is open to all graduating seniors from Urbana High School.

### General Requirements

Applicant must be a US citizen and:

1. be an **Urbana High School** senior with at least one completed semester of the senior year;
2. pursue a course of study in **medicine or a related field** at any accredited institution of higher education (two or four year program);
3. enroll and complete a **full-time program** (12 or more hours) each quarter or semester in an accredited institution of higher learning or post-secondary program;
4. **score at least 19 on their ACT or 1350 on the SAT** (new scores); &
5. have a minimum **cumulative GPA of 3.0**.

### Selection Criteria

Scholarships are awarded on the basis of financial need (30%), academic merit (40%), and character and other activities (30%). Personal interviews may be requested at the Foundation's discretion.

### Scholarship Amounts

This is a renewable scholarship; awards are made for up to four academic years. Scholarship amounts are determined by the amount available in the Fund, and are generally \$1,000 for each academic year. Scholarships must be applied toward tuition, books, necessary supplies and other required fees; any other uses must be approved by the Foundation.

### **How to Apply**

Applications are available from the Urbana High School guidance office and directly from the Foundation in January of each year. Scholarship materials must be delivered to the Foundation by **March 12, 2010, 4:30 p.m.** Final decisions are usually available in June and payments are sent to colleges in July. Award cannot be made payable to recipients.

### **Monitoring Scholarships During the Academic Year**

The Foundation will monitor the full-time enrollment of the recipient, the cumulative GPA, and the major field of study (where applicable). Students may be asked to provide documentation, such as transcripts or class schedules, to assist with this monitoring.

### **Scholarship Termination**

If a student does not meet the stated requirements for their scholarship(s), the Foundation will terminate the scholarship and request any unused funds to be refunded from the student's account. For this scholarship, students must maintain a full time class schedule (12 or more credit hours) and a 2.75% cumulative GPA. Students whose scholarships have been terminated *are* eligible to re-apply in future years.

### **Conflict of Interest Policy**

Foundation trustees, staff, and their immediate family members are not eligible for Springfield Foundation Scholarships. Immediate family members include a trustee or staff's spouse and children (step, adopted, foster); brother, sister, their spouses and children; and a trustee and staff member's grandchildren.

**For Further Information:** Contact the Foundation's Program Officer at (937) 324-8773.

**Return applications to: The Springfield Foundation  
4 West Main Street, Suite 825  
Springfield, Ohio 45502**

## Application Instructions – Urbana High School Seniors

**Complete this application form if you are currently a senior at Urbana High School with plans to attend an accredited post-secondary academic institution. You must be at least half-way through your senior year to apply for a college scholarship from the Springfield Foundation.**

Page 1:

### Personal Information

Applicant Name: First, middle and last name.

Address: This is the residence where the applicant lives more than one-half of the year.

Phone: List your home phone (with area code) and any other number where you can be reached (i.e., cell phone).

List your E-mail address, Birthdate, Age and County of Residence in the appropriate spaces.

Middle School: List all middle schools attended, with the years of attendance.

High School: List all high schools attended, with the years of attendance. (Attach a separate sheet if explanation is needed.)

High School Graduation Date: List the month and year you will graduate from high school.

Current GPA: This should be your GPA after the first grading period (January) of your senior year. List your ACT or SAT score in the appropriate space. If you have taken both, you may list both. If you have taken the test more than once, list your best score. Be sure to attach a current transcript.

Superior Academic Awards/Honors: Indicate if you have received an award or participated in advanced academic coursework. Examples include: National Honor Society, National Merit Scholar Finalist or Merit Scholar.

How have you challenged yourself in your educational pursuits? Indicate if you have been unusually challenged during high school. Examples could be: Choosing to take a difficult course load; working while maintaining full course load and school activities; Advanced Placement or International Baccalaureate classes; caring for an ill family member. You may attach an additional sheet, if needed.

Intended College: Indicate the college or colleges you are considering. If you have already been accepted, please note this. If you plan to attend Community Hospital School of Nursing, Ohio State University or Wittenberg University, attach a copy of your acceptance letter.

Intended Field of Study: Indicate the major or field of study you plan to pursue. If you don't know yet, list "undecided".

Anticipated Graduation: Indicate the year in which you expect to complete college.

Past Springfield Foundation Scholarships? Please indicate whether you have applied for or received a Scholarship through the Springfield Foundation in the past.

### Family Information

Parent or Guardian Names: List your Parent(s) first and last names, and their marital status (married, divorced, etc.)

Dependent Children: Indicate the number of dependent children in your family. This would include children who are financially dependent on your parents, even if they no longer live in the family home.

Applicant lives with: Indicate the parent you live with for most of the year.

Annual Family Income: List total family income as reported on taxes. Do not include income earned from the student's part-time work. *You must submit page 1 of the SAR (Student Aid Report) printout.* If you have not completed a FAFSA (Free Application for Federal Student Aid), you may instead submit your most recent federal income tax return form 1040 or 1040A, or a letter from your school's financial aid office to verify the extent of your financial need.

Special Circumstances: Any special financial circumstances may be described on a separate sheet of paper, if needed. Examples of special circumstances include: parent recently out of work, other children in college, extensive family medical bills.

Page 2:

List activities in the various areas as requested on this page. Attach an additional sheet of paper if necessary. Examples of activities include:

*Extracurricular activities:*

<u>Name of Activity</u>	<u>Role</u>	<u>Area of Interest</u>	<u>Year/Grade Level</u>
School Musical	Cast	Drama	Fr, So, Jr, Sr
Track	Team Member	Athletics	Fr, So, Jr
Spanish Club	President	Language	Jr, Sr

*Community Service:*

<u>Name of Organization</u>	<u>Type of Service</u>	<u>Total hrs. of service</u>
Eaglewood Nursing Home	Pet Therapy	100 hours

*Paid Work Experience:*

<u>Employer</u>	<u>Position Held</u>	<u>Dates worked and Avg. Hours</u>
Krogers	Bagger	June – Aug 2008 (20 hrs/wk)

*Superior Awards:*

<u>Name of Award</u>	<u>Area of Activity</u>	<u>Year/Grade Level</u>
Eagle Scout	Boy Scouts Tecumseh Council	2007

Page 3:

Create a personal statement to answer the essay question. It is acceptable to hand-write your response (neatly), type and then cut and paste, or type directly in the space provided. Do not exceed more than one page total in your essay response.

Page 4:

Review the application before submitting. Be sure you have answered all questions completely. Double-check that all attachments are included. You are encouraged to have someone else read the application to check for spelling, grammar, etc. The applicant and parent(s) must both sign the form on Page 4!

References:

Two blank reference forms are included with your application. You may copy them if you like. Be sure to enter your name on the blank line. All applications require two completed references. References may come from teachers, counselors, employers, or other adults who are not related to you. It is best to choose references who can comment on your ability to succeed with post-secondary work. You may request the references to be returned to you or mailed directly to the Springfield Foundation.



**Academic, Community Service and Employment History**

List *extracurricular activities* in which you have participated in the past 5 years, and indicate any leadership positions held:

Name of Activity                      Role                                      Area of Interest                                      Grade Level

List *community service* you have provided in the past 5 years:

Name of Organization                                      Type of Service                                      Total Hours of Service

List paid *work experience*:

Employer    Position Held    Dates Worked & Avg.Hrs.

List *superior awards* you have earned for the past 5 years:

Name of Award    Area of Activity    Grade Level

**Essay:**

*Answer not to exceed one page total.*

**Personal Statement:** Of your activities and accomplishments to date, which one is the most important to you and why? Who or what has been the biggest influence in your decision to pursue additional education in your chosen field? Why?

**Attachments:**

Your scholarship application must include the following items:

- The completed, signed, original application form, *paper-clipped* in order.
- Two recommendations from teachers, guidance counselors or other references who are not relatives.
- One original high school transcript with ACT or SAT scores.
- Page one of your Student Aid Report, or other financial documentation.
- If you plan to attend Community Hospital School of Nursing, Ohio State University or Wittenberg University, attach a copy of your acceptance letter.

**Proof read your application and keep a copy for your records!**

**Return applications to:**

The Springfield Foundation  
4 West Main Street  
Suite 825  
Springfield, OH 45502

**Signatures:**

I certify that the information on this form is true and complete to the best of my knowledge. I further agree to abide by the scholarship policies and regulations of the Springfield Foundation.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Scholarship Recommendation Form**

\_\_\_\_\_ is applying for a scholarship from the Springfield Foundation. Your assessment of the applicant will be helpful to the Scholarship Selection Committee. **Please return this form to the student. The deadline for receipt of all application materials to the Foundation, including this recommendation, is March 12, 2010.**

1. How long have you known the applicant?
2. In what capacity have you known the applicant? If as a teacher, in what subjects and at what grade level did you teach the candidate?
3. In relation to others in the applicant's age group whom you have known, please rate the applicant by checking the appropriate spaces below. Mark "N/A" if you have no basis for evaluating a particular trait of the applicant.

	<b>Superior</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>
Ability to set realistic goals	.....	.....	.....	.....
Academic Potential	.....	.....	.....	.....
Career Potential	.....	.....	.....	.....
Concern for others	.....	.....	.....	.....
Creativity	.....	.....	.....	.....
Extracurricular Participation	.....	.....	.....	.....
Follow-through	.....	.....	.....	.....
Initiative	.....	.....	.....	.....
Leadership	.....	.....	.....	.....
Personal Integrity	.....	.....	.....	.....
Problem-solving Ability	.....	.....	.....	.....
Resourcefulness	.....	.....	.....	.....

4. What is your overall opinion of the applicant? Why do you believe he/she should be given scholarship support? (use back side of page or attached statements are allowed)

Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Return completed form to Scholarship Applicant or mail to:  
Springfield Foundation, 4 West Main Street, Suite 825, Springfield, OH 45502.

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Academic Potential	.....	.....	.....	.....
Career Potential	.....	.....	.....	.....
Concern for others	.....	.....	.....	.....
Creativity	.....	.....	.....	.....
Extracurricular Participation	.....	.....	.....	.....
Follow-through	.....	.....	.....	.....
Initiative	.....	.....	.....	.....
Leadership	.....	.....	.....	.....
Personal Integrity	.....	.....	.....	.....
Problem-solving Ability	.....	.....	.....	.....
Resourcefulness	.....	.....	.....	.....

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Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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