

FULTON COUNTY REMC SCHOLARSHIP

Due Date: March 27, 2024

Purpose: To establish a program that encourages families of Fulton County REMC members to further their education.

Scholarship: Seven scholarships for \$1,000.00 each will be awarded. Paid to the student at the start of the second semester, with proof of fulltime enrollment in a college or trade school.

Eligibility: To be eligible for the scholarship award, the following provisions will have to be met by the applicant:

- 1) The applicant must be a graduating high school senior attending one of the following high schools: Caston, Culver, North Miami, Pioneer, Rochester, Tippecanoe Valley, or Winamac.
- 2) The applicant's parents or grandparents must be a member of Fulton County REMC and receiving electric service from the cooperative; or the applicant must have a parent who is an employee of Fulton County REMC.

APPLICATION FOR FULTON COUNTY REMC SCHOLARSHIP

Applicant's parents or grandparents must be members of Fulton County REMC or a parent must be an employee of Fulton County REMC

Student Applicant's Name: _____

Home Address: _____

Date of Birth: _____

Telephone Number: _____ Circle One: Female Male

Name of High School: _____

Name of parent or grandparent (**please circle the relationship**) who is a member of Fulton County REMC or parent who is an employee of Fulton County REMC:

Name: _____

Address: _____

Telephone Number: _____ REMC Account #: _____

Father or Male Guardian:

Mother or Female Guardian:

(Name)

(Name)

(Address)

(Address)

(City, State, Zip)

(City, State, Zip)

Date of Graduation: _____ Class Rank: _____ Class Size: _____

****ATTACH TRANSCRIPT OF APPLICANT'S GRADES SIGNED BY SCHOOL OFFICIALS.****

ACT Composite Scores: English: _____ Math: _____

Reading: _____ Science Reasoning: _____

SAT Scores: Critical Reading : _____ Math: _____ Writing: _____

Name of College You Plan to Attend: _____

Accepted: _____ Major Course of Study: _____

FINANCIAL DATA

Please report any unusual family/personal/financial circumstances to consider:

Number & age of siblings at home:

SCHOOL ACTIVITIES

List all school activities (band, speech, sports, clubs, etc.) and years participated:

NON-SCHOOL ACTIVITIES

List all non-school activities (scouts, 4H, church, etc.) and years participated:

COMMUNITY SERVICE

List all community service (volunteer work, of benefit to others) performed:

WORK EXPERIENCE

List all work (summer, part-time during school year) experience:

Employer	Time Frame

(To be completed by instructor in this year of school or furnish two letters of reference)

Evaluation of student: (Leadership, perseverance, attitude, etc.)

Signed: _____ Position: _____

High School: _____ Address: _____

Please indicate your future plans and goals as well as a brief explanation as to how this scholarship will help you reach your goals.

My signature indicates my permission to release all personal and academic records to this scholarship committee. If under 18 years old, a parent's signature is also requested.

Date: _____

Student Signature

Parent's Signature, if necessary