

Henry County REMC

Scholarship Program Official Rules

1. Henry County REMC will provide six, one-time \$1,000 scholarships. Three males and three females will be selected to receive the award.
2. High school seniors whose parent(s) or guardian(s) are members of the Henry County REMC are eligible to apply. The children of HCREMC employees or directors as well as the children of the Operation Round-Up board are ineligible to apply.
3. Applicants must have a 3.00 GPA or higher through the first semester of their senior year.
4. **Applications must be completed, appropriately signed and mailed or delivered to Henry County REMC by Friday, Mar. 20, 2020.** An official application must be used. Incomplete or illegible applications may be discarded at the judges' discretion.
5. A committee will select six males and six females to be interviewed. Scoring will be based upon a maximum of 25 points for GPA and academics, 25 points for extra-curricular and school activities and 25 points on financial need.
6. **The twelve finalists will be invited to REMC for an interview where they can earn up to 25 additional points.** The points from the pre-screening carry over.
7. Scholarships will be paid after successful completion of one term in college and continued enrollment at an accredited college or technical school. Checks will be made out to the accredited college or technical school where they are enrolled.
8. The decision of the judges is final.



Return applications to:
HCREMC Scholarship Committee
Henry County REMC
P.O. Box D
New Castle, IN 47362

Personal Achievements – Non-school Activities

List the name of the organization or activity in which you participated, years of participation and any leadership roles held. If necessary, attach a separate sheet.

Organization	Years	Offices or Leadership Roles
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Work Experience

Describe your work experience during the past four years.

Place of employment	Position	Length of employment	Hours per wk.
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

We have examined this application and the records are true, complete and accurate. We do hereby grant permission for the release of the required scholastic records.

(Applicant) _____ Date: _____

(Parent or Guardian) _____ Date: _____

Scholastic Record *(To be completed by high school principal or counselors)*

Please attach a transcript of applicant's grades, signed by school official. The transcript should be for grades 9-11, plus the first semester of the senior year. Applicant information must be confined to the official application form (which may include additional sheets as noted) and grade transcripts.

Number of students in senior class _____

Class rank of applicant _____

Cumulative GPA (4.0 scale) _____

SAT Score _____

ACT Score _____

Other Academic Achievements, Honors or Awards

School Official _____ Title _____

Return all pages and official transcript to:

Henry County REMC Scholarship Committee
Henry County REMC
P.O. Box D
New Castle, IN 47362

Deadline for applications: March 20, 2020

Financial Assistance Questionnaire

Parent/Self Information

Income, expense, and asset data for the last calendar year. Please have your parent(s) or self if emancipated fill in the following information. They must also indicate whether the information is from:

_____ A completed tax return – IRS Form 1040

_____ Estimates based on current income information to be filed this year.

- | | | |
|---|---------------------|----------|
| 1. Adjusted gross income | | \$ _____ |
| 2. Total U.S. income tax paid | | \$ _____ |
| 3. Income earned from work by: | Father | \$ _____ |
| | Mother | \$ _____ |
| | Self if emancipated | \$ _____ |
| 4. Cash, savings, bonds, stocks, checking accounts, certificates of deposits, notes, etc. | | \$ _____ |
| 5. Student's savings | | \$ _____ |
| 6. Other grants or scholarships already awarded to student | | \$ _____ |

Additional information:

Date of FAFSA application _____

Estimated Family Contributions (EFC) \$ _____

Are you eligible for a 21st Century Scholarship? Yes _____ No _____

The parents' (self) current marital status is:

_____ single _____ married _____ separated _____ divorced _____ widowed

Total number of family members who will be attending a post-secondary school at least half time during the next school year, including applicant. _____

Ages of siblings/children _____

Please report any unusual family or personal circumstances that you feel warrant attention:
