

RICK WEAVER MEMORIAL SCHOLARSHIP

INSTRUCTIONS

1. PLEASE COMPLETE THE ATTACHED FORMS AND RETURN TO:

ATTN: GUIDANCE COUNSELOR
CLARION-LIMESTONE ARE HIGH SCHOOL
4091 C-L SCHOOL ROAD
STRATTANVILLE PA 16258

2. INCLUDE TWO LETTERS OF RECOMMENDATION AND THE REQUIRED ESSAY.
3. FOR AN APPLICATION TO BE CONSIDERED, ALL INFORMATION MUST BE RECEIVED BY THE COUNSELOR IN THE GUIDANCE OFFICE BY 3:00 P.M. ON THURSDAY, APRIL 15, 2021.

RICK WEAVER MEMORIAL SCHOLARSHIP APPLICATION

NAME _____
ADDRESS _____
PHONE NO _____

Describe extra-curricular and/or community activities in which you have participated in the last two (2) or more years. Attach extra sheet if more space is needed.

List honors or awards which you have received for service to your school and/or community. Attach extra sheet if more space is needed.

State name of post-secondary educational institution which you plan to attend. Applicant must notify the high school guidance counselor immediately of any changes in post-secondary education plans.

Include two (2) letters of recommendation with this application.

Also, include a brief essay (one typewritten page) on your intended major area of study at college and the goals you hope to achieve through completing a post-secondary educational program.

All forms, letters of recommendation, and the essay must be submitted to the high school guidance counselor on or before THURSDAY, APRIL 15, 2021.

The applicant selected as the scholarship recipient must provide verification of his/her acceptance at the post-secondary educational institution he/she will attend before any monetary award will be granted. The award will be paid directly to the appropriate post-secondary educational institution.

Applicant's Signature

DATE

No scholarship applicant shall be discriminated against on the basis of race, color, national origin, religion, age, sex, marital status, or any relevant handicaps and disabilities.

RICK WEAVER MEMORIAL SCHOLARSHIP

Dear Applicant:

Please complete Part A of this form, sign it, and mail it to the Financial Aid Office of the institution you will be attending. The Financial Aid Director should complete Part B and return it to the address given below.

PART A

I _____ (SOCIAL SECURITY# _____)
Have been accepted at _____
as a freshman for the _____ academic year. I hereby grant my permission to
the Financial Aid Office of the institution which I plan to attend to release my financial aid
information to the Rick Weaver Memorial Scholarship Committee.

Student Signature

Date

PART B

Dear Financial Aid Officer:

Please list below the student's approximate cost and financial aid awards for the first semester of the freshman year:

Complete Cost(Including books, fees, transportation and miscellaneous expenses \$	_____
Family Contributions from Needs Analysis	_____
Other known Financial Aid:	
PHEAA	_____
PELL	_____
SEOG	_____
SCHOLARSHIPS	_____
LOANS	_____
OTHER AID	_____
Remaining need	_____

Name of Aid Officer _____ Title _____

School

Signature

Please return completed form by April 26, 2021 to: ATTN: GuidanceCounselor
Clarion-Limestone High School
4091 C-L School Road
Strattanville PA 16258

THANK YOU!

RICK WEAVER MEMORIAL SCHOLARSHIP

You have already met one the qualifications for the RICK WEAVER MEMORIAL SCHOLARSHIP by ranking in the top 20% of our senior class.

THE APPLICATION, LETTERS OF RECOMMENDATION AND ESSAY MUST BE SUBMITTED TO THE GUIDANCE OFFICE ON OR BEFORE THURSDAY, APRIL 15, 2021.

ATTENTION:

******** COMPLETE THE TOP HALF OF THE
FINANCIAL AID PAGE AND MAIL IT TO YOUR
COLLEGE RIGHT AWAY SO IT CAN BE
FILLED OUT AND RETURNED TO THE
GUIDANCE OFFICE BY APRIL 26, 2021***
