

“THE LOMAN and OLIVE SHIVERDECKER SCHOLARSHIP”

# SCHOLARSHIP APPLICATION

Sponsored by B.P.O.E. #1139

**\$1,000 - One Year Scholarship (Renewable)**

BASED ON SCHOLARSHIP, LEADERSHIP AND FINANCIAL NEED

*IMPORTANT: Before preparing this application, it is recommended that the procedures outlined on back page be carefully studied and then completely executed.*

Social Security

Student's Full Name: Miss .....  
Mr. ....  
(use typewriter) .....  
Number

Student's Address ..... Tel: .....  
Street ..... City ..... State ..... Zip ..... Area/Number

Date and Place of Birth ..... Citizenship: .....

Schools attended (ninth through twelfth grades)

.....  
Name of School ..... Date of Entrance ..... Period Attended

.....  
Name of School ..... Date of Entrance ..... Period Attended

Date graduated ..... Number in class ..... Rank in class .....

Father: ..... Age: ..... Occupation: .....  
Name

Mother: ..... Age: ..... Occupation: .....  
Name

Parents marital status – Mother: Married ..... Widowed ..... Divorced ..... Remarried .....

Father: Married ..... Widowed ..... Divorced ..... Remarried .....

DATE:

.....  
Signature of Student

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IN ORDER TO APPLY FOR THIS SCHOLARSHIP  
THE FOLLOWING CONDITIONS MUST BE MET:

1. You must have graduated from any Darke County high school
2. You must be attending or plan to attend Edison State Community College

**SCHOLASTIC**

Honors and Awards (State year and nature of honor or award) .....

Offices and positions of Leadership (State name of organization, position and year) .....

Member of Organization (where no office was held) (State name of organization and year, thus: Band 2,3. State only major activities) .....

**EXTRA CURRICULAR (School Related)**

Honors and Awards (State year and nature of honor or award) .....

Offices and positions of Leadership (State name of organization, position and year) .....

Member of Organization (where no office was held) (State name of organization and year, thus: Drama 2,3. State only major activities) .....

**CIVIC (Non-School Related)**

Honors and Awards (State year and nature of honor or award) .....

Offices and positions of Leadership (State name of organization, position and year) .....

Member of Organization (where no office was held) (State name of organization and year, thus: Scouting, 4-H, etc. State only major activities) .....

State your plans for enrollement in a regionally accredited American college or university.....

Have you been granted scholarship aid?..... If so, give details.....

Do you intend to apply for financial aid at the college(s) you plan to attend? If so, give details:

Have you reason to expect scholarship aid from any other source?..... If so, give details:

Positions held in gainful employment, periods of employment, average time employed each week, earnings, savings, etc.....

Total personal savings: \$ \_\_\_\_\_

Any additional data to show financial need and general worthiness. Be specific in this.....

WHY ARE YOU APPLYING FOR THIS SCHOLARSHIP? (briefly)

WHAT DO YOU PLAN TO DO WITH THIS SCHOLARSHIP? (briefly)

FINANCIAL NEED

1) . Annual Gross Income ..... \_\_\_\_\_

2) . Assets – Home

    Market Value of Home ..... \_\_\_\_\_

    Less Unpaid Mortgage ..... \_\_\_\_\_

    Net Home Asset ..... \_\_\_\_\_

    Times 12% Taxation Rate - Home Supplement ..... \_\_\_\_\_

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GENERAL INSTRUCTIONS

- 1.- Application must be made on this form only, dated and signed by applicant
- 2.- Attach official signed transcript of high school grades
- 3.- CEEB, SAT and(or) ACT test scores must be included
- 4.- Copies of exhibits of achievement in scholarship, leadership, athletics, dramatics, community service, or other activities may be attached
- 5.- Deadline for submission is April 1, \_\_\_\_\_
- 6.- Decisions of the scholarship committee will be final