

Logan County Libraries

Susie Parker Scholarship Application

Directions to the applicant:

To be eligible, you must be a graduate of Bellefontaine High School with a 3.0 GPA. You must be enrolled in an Ohio accredited four year college. The scholarship must be used for tuition only. Please complete all information requested as accurately as possible. Please include your transcript. This application must be returned to the Director of the Logan County Libraries by the first Monday in April. (Please type or clearly print the requested information.)

Student Name * _____

Student Address * _____

Mother's Name * _____

Mother's Address * _____

Father's Name * _____

Father's Address * _____

Guardian Name (if different from above) * _____

Guardian's Address * _____

I am presently a graduating senior at Bellefontaine High School * _____ Yes _____ No

Please list any other High Schools you have attended & dates. * _____

Student Signature * _____

Parent Signature * _____

Date * ____ / ____ / ____ (MM/DD/YYYY)

What is your 7th semester class rank and how many members in your class? * _____

What is your 7th semester grade point average? * _____

What is your ACT composite score? * _____

What are your SAT verbal and math scores? * _____

Please list your participation in high school activities (include offices held & years of participation) *

Please list your participation in out-of-school, community & volunteer activities during the past four years. (Please list dates & location of activities) *

List employment during the last four years. (Please include location & dates) *

I have been accepted & plan to attend the following college. *

What is your planned major? * _____

What is the approximate tuition cost for one year? * _____

Please list your Father's occupation, position & location. *

Please list your Mother's occupation, position & location *

What is your approximate annual family income? * _____

To help defray expenses, how much will you be contributing from savings, summer work, etc.? * _____

To help defray expenses, how much will your parents be contributing? * _____

How much have you already received in scholarship/financial aid per year from your university/college? *

What is the total amount of any other scholarships you have received? *

List any local scholarships you have applied for. *

How many total dependents are supported by your family? (Include yourself, mother, father, sisters, brothers, etc.) *

Including yourself, how many members of your immediate family will be attending college next year? *

Please state your career goals & what you would like to accomplish in your life. (Attach - In your own handwriting) *

Send completed applications to:



KNOWLTON LIBRARY
ATTN: LIBRARY DIRECTOR
220 N. MAIN ST.
BELLEFONTAINE OHIO 43311
PHONE: (937) 599-4189
FAX: (937) 599-5503