

Babitt Family Scholarship Fund

A Four-Year Renewable Scholarship
(Founded by George J. Babitt)

Administered by Wellington Schools Endowment
Fund
through
Lorain County Community Foundation

Deadline for submission is April 1

Application is to be returned to WHS Guidance Office.

Recipient will be chosen by the Babitt Family Committee.

Nomination Form Babitt Family Scholarship

The purpose of this scholarship fund is to aid students interested in continuing their education. The applicant must demonstrate that they have been diligent in their high school academics, have the motivation to succeed in their pursuit of additional education, and may have the need of financial assistance. The awarded scholarship money will be paid directly to the recipient's college of study.

Application Forms Must Be Typed Or Neatly Printed

Name _____ Phone # _____

Mailing Address _____

City/State _____ Zip _____ E-mail Address _____

Age _____ Date of Birth _____ Male _____ Female _____

What college, university, or accredited technical schools have you been accepted to? Please list in order of probability of attending. _____

=====

What do you anticipate your major course of study to be? _____

Second Choice _____ Third Choice _____

Those who are considering continuous study in the area of Industrial Engineering Technology are encouraged to apply.

All applications that are submitted will be reviewed and considered.

Anticipated Tuition Per Year: _____ Cost of Room and Board: _____

Have you received other scholarships? If so, please provide names and value. _____

Would you be financially able to attend college without the aid of this scholarship? _____

Will you be working this summer to help pay for the cost of school? _____

Where? _____

Estimated amount of family contribution toward college expense? _____

Parent Information

Father's Name _____ Phone # _____

Mailing Address _____

City/State _____ Zip _____

Place of Employment _____ Job Title _____

Mother's Name _____ Phone # _____

Mailing Address _____

City/State _____ Zip _____

Place of Employment _____ Job Title _____

Is the student eligible for any tuition reimbursement because of your employment? _____
(Example: Oberlin College employees may be eligible for reimbursement of some college tuition costs.)

If eligible for any reimbursement, please explain how it applies to tuition, books, and/or room and board.

Do you have other dependents presently attending college? _____

What college or university do they attend? _____

Student Statement

Please provide to the Babitt Family Scholarship Fund Committee a brief statement of why you should be selected for this scholarship. You may include a statement of need.

Personal and Professional Goals

Please list the short term and long-term goals you hope to achieve after graduating from Wellington High School and attaining your degree.

Personal School Activities

List the activities participated in during high school such as: Class Officer, Student Council, Athletics, Music, Drama, FFA, etc.

<u>Organization/Activity</u>	<u>Number of Years</u>	<u>Leadership Role / Remarks</u>
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		

Personal Non-School Activities

<u>Organization/Activity</u>	<u>Number of Years</u>	<u>Leadership Role / Remarks</u>
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		

If additional space is required, feel free to submit a second page.

Scholastic Record

(To be completed by the high school principal or guidance counselor.)

High School and College (if applicable) scholastic record by years:

Attach transcript of applicant's grades signed by a school official. Applicant information must be confined to the official nomination form with no attachments other than grade transcripts.

Class rank at the end of student's: Junior Year _____

Class rank at the end of student's: Senior Year _____

Cumulative GPA _____ ACT Composite _____ SAT _____

Please list any scholastic honors the student has received during high school or college (Local, County, District, or State):

Principal's or Guidance Counselor's Signature

Date

Statement of Applicant and Parent or Guardian

If a recipient decides not to attend college after the scholarship has been awarded, the scholarship money must be returned, in full, to the Babitt Family Scholarship Fund.

We have examined this application and the records are true, complete, and accurate.

Signed: _____ Date: _____
(Applicant)

Signed: _____ Date: _____
(Parent or Guardian)