

GFWC OHIO SCHOLARSHIPS

The GFWC Ohio Federation of Women's Clubs has (4) scholarships available through application with the **Circleville Junior Women's Club.**

"Amounts determined each year - \$1000 and above"

One applicant will be chosen to represent the club at the state level for each scholarship and **the club will submit** it to the state with completed club materials.

- Annette Phelps Lincoln Scholarship - Course Study in Teaching or Library Professions
- Ethel Swanbeck Allied Health Scholarship - Course Study in Allied Health (doctor, nurse, pharmacist, veterinarian, x-ray technician, laboratory technician)
- Elaine Weinman Memorial Scholarship - Course Study in field of Communication, limited to radio, television, drama, speech or journalism
- Art Scholarship - Attending art school

All Scholarship applications are to be sent to:

Sharon Sheridan, 444 Virginia Ct., Pataskala, OH 43062

For Questions: ssherida3@gmail.com

Applications postmarked by January 29, 2024

Please note: All required Materials must be included to be considered for the scholarship



GFWC/Ohio Federation of Women's Clubs Scholarships SCHOLARSHIP APPLICATION INSTRUCTIONS Amounts determined each year

ANNETTE PHELPS LINCOLN SCHOLARSHIP: Named in honor of the first president of the Ohio Federation of Women's Clubs, this scholarship is available to graduating high school seniors to use in securing education in the Teaching or Library professions at an Ohio college or university of the student's choice.

ART SCHOLARSHIP: This scholarship is available to a graduating high school senior who will attend an accredited college, university or art school in Ohio. An **ORIGINAL** piece of art must be submitted when the application is submitted. All artwork will be returned to the student.

ELAINE WEINMAN MEMORIAL SCHOLARSHIP: This scholarship is available to a graduating high school senior for use in securing an education beyond high school in the field of Communications, limited to radio, television, drama, speech or journalism, from an accredited Ohio college, university or technical school.

ETHEL G. SWANBECK ALLIED HEALTH SCHOLARSHIP: This scholarship is available to a graduating high school senior pursuing a course in the study of an Allied Health Field at an Ohio college or university of the student's choice. The applicant may use the scholarship for a degree as a doctor, nurse, pharmacist, veterinarian, X-ray technician, laboratory technician, etc.

REQUIRED MATERIALS

1. FROM THE APPLICANT:

- An official transcript signed by the school guidance counselor which must include class rank and grade point average. If the school does not include class rank and/or grade point average, the guidance counselor should include a letter stating this. *The student must have a grade point average of 3.0 or better. (Art Scholarship applicants must have a g.p.a. of 2.6 or better.)*
- Letter of recommendation from counselor, high school principal, administrator or teacher must be signed. (Art Scholarship applicants must have a signed letter of recommendation from an art teacher.)
- Copy of letter of acceptance from an Ohio college or university on official school letterhead.
- Essay - The applicant's name should be typed or written on each page of the essay. The essay should include: why are you choosing this line of study and what have you been doing to learn more about it (example- job shadow, mentor, classes, school projects)? Include what Community Service Project(s) you have been involved with that have most influenced either your Community or your decision to pursue the line of study that you have chosen.
- Copy of completed GFWC/Ohio Federation of Women's Club Supplemental Questionnaire.
- Completed and signed application form.

• ADDITIONAL QUALIFYING FACTORS FOR ART SCHOLARSHIP APPLICANT'S ARTWORK:

- Media: oils, watercolor, pastel, acrylic, pen and ink, pencil or charcoal.
- Size not to exceed 20" x 24" unmatted.
- Frames: Oil, if framed, must have simple frames, such as molding; other media should be matted. **NO GLASS.**
- **NO REPRODUCTIONS.** No portraits, cartoons or posters. Graphics, if entered, must be the original drawing or painting. Any entry that appears to be copied will be disqualified.

GFWC/OHIO FEDERATION OF WOMEN'S CLUBS
SCHOLARSHIP APPLICATION

CHECK THE SCHOLARSHIP BEING APPLIED FOR:

- _____ **ANNETTE PHELPS LINCOLN SCHOLARSHIP**
GPA 3.0 or better required
- _____ **ART SCHOLARSHIP**
GPA 2.6 or better required
- _____ **ETHEL G. SWANBECK ALLIED HEALTH SCHOLARSHIP**
GPA 3.0 or better required
- _____ **ELAINE WEINMAN MEMORIAL SCHOLARSHIP**
GPA 3.0 or better required

TO BE COMPLETED AND SIGNED BY THE APPLICANT:

FULL NAME _____ Date of Birth _____

HOME ADDRESS _____

CITY _____ ZIP CODE _____

TELEPHONE NUMBER _____ E-MAIL ADDRESS _____

NAME OF HIGH SCHOOL _____

CLASS RANK _____ TOTAL IN CLASS _____ GPA _____

WHICH COLLEGE IN **OHIO** DO YOU PLAN TO ATTEND? _____

HAVE YOU BEEN ACCEPTED BY THIS SCHOOL? _____

WHAT IS YOUR INTENDED CAREER? _____

APPROXIMATE COST OF YOUR EDUCATION PER YEAR? _____

NUMBER OF DEPENDENT CHILDREN IN FAMILY? _____ AGES? _____

OTHER SIBLINGS OR PARENT IN COLLEGE? _____

If awarded a scholarship, I agree to notify the Chairman of the GFWC/Ohio Federation of Women's Clubs Scholarship Board of Trustees of my intention to accept or decline this scholarship by June 30. I also understand in order to receive my scholarship, proof of passing grades must be submitted by December 31.

APPLICANT'S SIGNATURE _____

SPONSORING CLUB Circleville Junior Women's Club

OMISSION OF ANY REQUIRED DOCUMENTS WILL DISQUALIFY APPLICANT

THIS FORM MAY BE DUPLICATED. RETAIN ORIGINAL IN THIS DIRECTORY

GFWC/Ohio Federation of Women's Clubs Supplemental Questionnaire

Name _____

Sponsoring Club Circleville Junior Women's Club

EXTRACURRICULAR SCHOOL ACTIVITIES (clubs, sports, music, art, drama, letters, etc.) and **SCHOOL AWARDS** (science projects, class offices held, honors, etc.) Use separate line for each.

Grade

	9	10	11	12

COMMUNITY ACTIVITIES, WORK EXPERIENCE, INTERESTS

Grade

	9	10	11	12

Use additional sheets if necessary.

This Supplemental Questionnaire must accompany ALL scholarship applications.
THIS FORM MAY BE DUPLICATED. RETAIN ORIGINAL IN THE DIRECTORY