

ST. LAWRENCE COUNTY SUPERVISORS' ASSOCIATION
SCHOLARSHIP APPLICATION
2024

Awarded by the
St. Lawrence County Supervisors' Association

Directions: Complete this application form in full by printing or typing.

Read and sign:

I acknowledge that I meet the minimum requirements of the application form (cumulative **academic average of 90 or more**, a member of my high school graduating class of **2024**, studying in the most rigorous courses, and will be furthering my education in the business or professional field such as teaching, engineering etc.). I understand that **one of the two signed** recommendations for this scholarship must be from an adult in the school system (administrator, teacher, counselor, coach) and specifically addressed to this scholarship and **the second signed** letter of recommendation for this scholarship must be from an adult in the community (church leader, employer, scout leader, etc.--- meaning not in school district, but with whom you have worked or served) and specifically addressed to this scholarship. These letters must show reference to the scholarship only; recommendation letters for college application are **not** acceptable. The adults must be aware of this application; through their signatures. The letters will attest to my character rather than just academic success. **In the event of a tie** during the assessment of the applications, I will be required to attend a personal interview. I also understand that should I decide not to attend college, after being awarded the monetary gift (**\$500.00**) that I will have to repay this money to the St. Lawrence County Supervisors' Association treasury by November 1, 2024.

_____ (I read the above directions.)
Applicant's Signature

Applicant's Name _____

Address _____

1. List any extracurricular activity that you have been involved within the community:

2. List any experience in gainful employment (including baby-sitting, lawn work, etc. in addition to work at an established business). List employer's name and address, phone number and job title or description and length of employment:

3. List the college(s) to which you have been accepted and your intended major:

Star(*) the college you plan to attend, if this decision has been made, and send a copy of a letter of acceptance.

Answer the following questions specifically and concisely.

1. Why have you chosen your course of study and how did you choose the college to match this path?

2. College is an expensive adventure and everyone has a financial need. How do you plan to finance your education? What should we take into consideration for your circumstances?

3. What mentorship or/and leadership qualities do you have and how have you shared them?

4. What is your long-range career goal?

DEADLINE FOR RETURN OF APPLICATION IS March 31, 2024

**THE COMPLETED APPLICATION MUST BE RECEIVED BY MARCH 31ST,
BY MAIL OR HAND DELIVERED TO:**

Mrs. Sue Bellor, 19 Churchill Avenue, Massena, New York 13662

Checklist:

I read the paragraph above my signature.

Application with signature affirming that I read and understood the directions

“Signed” Letters of Recommendation (2) “per instructions” on first page

Official Transcript

College Letter of Acceptance-a copy showing letterhead and signature of official

Any questions may be referred to the education committee at the above address or call at 315-769-6146 (Answer phone is always on and your call will be returned in a timely manner.)