



*GREENEVIEW HIGH SCHOOL
SCHOLARSHIP APPLICATION FORM
2024*

_____ Elmo B. Higham Scholarship (Male)

_____ Ollie B. Higham Scholarship (Female)

INFORMATION:

The Board of Trustees of the Jamestown Area Foundation, Inc. is proud to announce the availability of the Elmo B. Higham and Ollie B. Higham college scholarships. Each year the Jamestown Area Foundation, Inc. awards a full four-year college scholarship to one Greeneview High School male graduate through the Elmo B. Higham Scholarship and to one Greeneview High School female graduate through the Ollie B. Higham Scholarship, both under the direction of the Bruce E. Higham Trust. Each scholarship includes all tuition, room, board, books, and a stipend for academic supplies. The scholarship is for attendance at any State of Ohio public supported college or university pursuant to the list of approved public schools as found at www.ohiohighered.org/campuses/map.

QUALIFICATIONS:

To qualify for this scholarship the applicant must be a United States citizen, a graduate of Greeneview High School, Jamestown, Ohio, have attended Greeneview High School for at least four consecutive years, and be attending a State of Ohio public supported school.

The successful applicant will have distinguished himself/herself academically and through his/her community service, as well as leadership roles demonstrated through his/her high school career.

DIRECTIONS:

Please fill out the application information to the best of your ability completely, accurately and truthfully. This application must be returned to the School Counselor at Greeneview High School no later than the posted date at the school's Counseling Office. Please type or print the information neatly.

Each applicant, in addition to fully completing and signing this application form, **MUST INCLUDE** the following three items:

- (1) A copy of both parents' most recent joint or individual Federal Income Tax Return – either Form 1040 or Form 1040EZ. All Social Security numbers and Tax Identification numbers should be redacted from the tax form as submitted.
- (2) A copy of the Applicant's Birth Certificate;
- (3) The Applicant's high school transcript through the seventh semester of attendance (fall semester of senior year).

NO APPLICATION WILL BE CONSIDERED BY THE JAMESTOWN AREA FOUNDATION, INC. BOARD OF TRUSTEES WITHOUT THESE MANDATORY ITEMS.

ELMO B. HIGHAM/OLLIE B. HIGHAM
SCHOLARSHIP APPLICATION FORM 2024

Please fill out this Application form truthfully and to the best of your ability. If a question does not apply to you, either leave it blank or write in "N/A" for "not applicable".

I. PERSONAL AND FAMILY INFORMATION

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Country of Citizenship: _____ Date of Birth: _____

Cell Phone: _____ E-mail: _____

Parent/Guardian No. 1 Household Information:

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Country: _____

Cell phone: _____ E-mail: _____

Relationship to Applicant: _____

Employed by: _____

Parent/Guardian No. 2 Household Information:

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Country: _____

Cell phone: _____ E-mail: _____

Relationship to Applicant: _____

Employed by: _____

II. **ACADEMIC INFORMATION**

CUMULATIVE GPA to date _____

Class rank _____ Out of how many students? _____

1. Have you completed any CCP Classes? (Check one) YES _____ NO _____
How many CCP Classes do you expect to have completed by graduation? _____

Have you completed any Advanced Placement (AP) courses?
(Check one) YES _____ NO _____

2. What is your highest SAT and/or ACT score? SAT _____ ACT _____
You must attach your Student Transcript through seventh semester high school to be considered.

3. Please list the colleges/universities to which you have applied or intend to apply:

4. Have you been accepted to any colleges/universities? (Check one) YES ____ NO ____
If YES, which ones? _____

5. What are your top three preferred colleges/universities?

First Choice: _____

Second Choice: _____

Third Choice: _____

6. What is your desired major? _____
What is your desired minor? _____

7. What are your professional/career aspirations? _____

8. What academic honors or awards have you received? (Include honors such as National Merit or Commended Scholar, National AP recognition, Valedictorian/Salutatorian, National Honor Society, Academic Booster Awards, Senior of the Month, etc.) _____

9. Have you ever been suspended or expelled from school?
 (Check one) YES _____ NO _____
 If YES, explain: _____

III. FINANCIAL INFORMATION:

1. Family Gross Annual Income: \$_____
2. How many people reside in your household (including you)? _____
 Is your household a single parent or dual parent household? _____
 Do you have any siblings currently attending college?
 (Check one) YES _____ NO _____ If YES, how many? _____

3. SCHOLARSHIPS

Have you applied for any other scholarships? (Check one) YES _____ NO _____
 Have you received other scholarships? (Check one) YES _____ NO _____
 If yes, from whom were they awarded and in what amounts? _____

4. Are you enrolled in an Ohio 529 College Plan? (Check one) YES _____ NO _____

5. Do either of your parents (or any other family member) work for an employer that provides college tuition benefits for which you are eligible?

YES _____ NO _____ If YES, explain: _____

IV. OTHER INFORMATION:

1. Please list any community service activities that you have participated in for the past three years: _____

2. Please list any employment/experience you currently have or have had in the last three years: _____

3. Are there any unusual circumstances that have affected your school performance that you would like us to know about, or any comments you would like to make on your own behalf? _____

CERTIFICATE AND SIGNATURE

I certify that the information I have provided in this Application is complete, accurate and truthful to the best of my ability. I understand that my scholarship award may be rescinded should the Board of Trustees of the Jamestown Area Foundation, Inc. determine that I have misrepresented or omitted any material information in this Application (including any required supplements or attachments to this Application). I authorize the Board of Trustees of the Jamestown Area Foundation, Inc. or its agents to verify information included in my Application. I further certify and agree that the Jamestown Area Foundation, Inc. may grant scholarship funds only if I accept all restrictions and conditions, if any, imposed by the Board of Trustees of the Jamestown Area Foundation, Inc. with respect to such grant. My acceptance of any scholarship grant funds operates as my acceptance of any such restrictions or conditions imposed by the Board of Trustees of the Jamestown Area Foundation, Inc. which have been disclosed to me prior to or at the time I accept any scholarship funds.

Signature _____

Date _____, 2024

PLEASE SUBMIT COMPLETED APPLICATION **(INCLUDING ALL REQUIRED ATTACHMENTS)** TO:

Greeneview High School Guidance Department

ATTN: Elmo Higham/Ollie Higham Scholarships

APPLICATION DEADLINE _____, 2024