

**EVELYN K. TITUS MEMORIAL SCHOLARSHIP
APPLICATION GUIDELINES**

Completed Application due on or before 4:30 PM, April 8, 2015

- 1) The scholarship shall be available to high school seniors and is renewable for four years.
- 2) Two (2) awards are available each year; one male and one female.
- 3) Applicant must be a resident of Warren County in Illinois.
- 4) Applicant must be majoring in Agriculture or Family & Consumer Sciences or related fields.
- 5) Applicant may attend any college or university.
- 6) Applicant is required to verify acceptance to or present enrollment at a college or university prior to receiving the funds.
- 7) The amount to be awarded annually shall be a *minimum* of \$1,000.00. The total dollar amount of scholarships awarded will be dependent on the amount of funds available.
- 8) Applicants shall be required to submit a written application, which will be provided.
- 9) Personal interviews of all applicants will be conducted in April of 2015. The selection committee will make its decision in May of 2015.
- 10) An alternate shall be selected in the event that the recipient does not meet the requirements as stated above.

In addition to eligibility guidelines, the following will be considered in selecting recipients:

- 1) Scholastics: Academic performance and honors
Rank in class
ACT score
- 2) Demonstrated interest in agriculture, family & consumer sciences and/or their related fields
- 3) Financial need
- 4) Evidence of self-help (How the student is contributing financially to his/her education.)
- 5) Character and personality: Consideration shall be given to maturity; industriousness and motivation; intellectual interest; moral character; and demonstrated leadership.

**UPON COMPLETION OF THIS APPLICATION, MAIL APPLICATION FORM,
TRANSCRIPTS AND PERSONAL REFERENCES TO:**

EVELYN K. TITUS MEMORIAL SCHOLARSHIP

c/o Warren-Henderson Farm Bureau®

1000 North Main Street

PO Box 348

Monmouth, IL 61462

Telephone: 309/734-9401

FAX: 309/734-6097

Application is also available online at www.whfarmbureau.org

EVELYN K. TITUS MEMORIAL SCHOLARSHIP

EVELYN K. TITUS MEMBERSHIP SCHOLARSHIP APPLICATION

WARREN-HENDERSON FARM BUREAU®
1000 NORTH MAIN STREET, PO BOX 348
MONMOUTH, ILLINOIS 61462

PLEASE TYPE

DATE:

SECTION 1. GENERAL INFORMATION

Name:

Home Address:

(Street/ Box #)

(Town & State)

(Zip Code)

Home County:

Home Phone:

Cell Phone:

(Area Code) (Number)

(Area Code) (Number)

E-mail Address:

Gender:

High School Attending:

Graduation Date:

Name and Address of College or University Accepted:

What will be your major area of study? Please be specific:

Father's Name:

Father's Address:

(Street/ Box #)

(Town & State)

(Zip Code)

Father's Home Phone:

Father's Cell Phone:

Father's Occupation:

Mother's Name:

Mother's Address:

(Street/ Box #)

(Town & State)

(Zip Code)

Mother's Home Phone:

Mother's Cell Phone:

Mother's Occupation:

SECTION 2. ACADEMIC INFORMATION

List your high school GPA:
(Enclose Transcripts)

List your high school class rank:

Number of students in your graduating class:

List your composite ACT score:

SAT score:

List all high school academic honors you have received:

SECTION 3. ACTIVITIES (attach an additional page, if necessary)

A. List all agricultural and/or family & consumer sciences or other clubs you belong(ed) to. Indicate offices held, position of leadership and activities in which you participate(d):

B. List all of your church, civic or community activities:

C. Briefly summarize your experience in agriculture and/or family and consumer sciences:

SECTION 4. PROFESSIONAL GOALS

Please attach a **typewritten** statement (one page or less) of your professional goals and objectives. Please include the contributions you expect to make to agriculture or family & consumer sciences and how this scholarship will help you achieve these goals.

SECTION 5. FINANCIAL ANALYSIS REPORT

Since financial need is one factor in selecting the recipient of an Evelyn K. Titus Memorial Scholarship, the following information will help the Trustees in their deliberations. The information is **strictly confidential** and will only be reviewed by the Memorial Scholarship Foundation Trustees.

Tell us how your education will be financed:

Do you plan to work during the school year to support your education:

If so, approximate: Hours/week: Income:

Where: Type of work:

Do you work during the summer: If so, where:

Type of work:

Do you have other scholarship(s) or tuition waiver?

If so, please complete the following:

Name of Scholarship

Value of Scholarship/Tuition Waiver

Approximately what percent of your education expenses are paid for by your parents:

List any other sources of income that you have:

Marital status (check one): Single: Married:

Dependents (If applicable) : Ages:

Name of spouse (If applicable): Spouse's Occupation:

Approximate amount of money you have saved for college:

Number of brothers and/or sisters in college:

SECTION 6. PERSONAL REFERENCES

Please have two adult persons who are acquainted with you, **at least one of whom must be a past or present teacher**, complete the enclosed Personal Reference forms. The references **may not be** relatives of the applicant. The completed Personal Reference forms shall not be attached to this application; they must be mailed directly to the Scholarship Committee.

Please list below the name and phone number of each personal reference:

Name: Phone Number:

Name: Phone Number:

I hereby certify that to the best of my knowledge, the above information is correct and complete.

Student's signature: Date:

Student's printed name:

Parent/Guardian's signature: Date:

Parent/Guardian's printed name:

APPLICATION DEADLINE IS 4:30 PM on April 8, 2015

Please return the completed application and a copy of your high school transcript to the scholarship committee at the following address: **Evelyn K. Titus Memorial Scholarship, c/o Warren-Henderson Farm Bureau®, 1000 N Main Street, P.O. Box 348, Monmouth, IL 61462**

EVELYN K. TITUS MEMORIAL SCHOLARSHIP
PERSONAL REFERENCE

Name of Scholarship Applicant:

1. Describe how you know the applicant:

2. Describe the character traits of the applicant you have observed:

3. Tell us why you believe the applicant should be awarded an Evelyn K. Titus Memorial Scholarship:

Signature:

Printed Name:

Mailing Address:

City, State, Zip:

Phone Number:

Please return this completed form in a sealed envelope directly to the scholarship committee on or before April 8, 2015. The mailing address is: **Evelyn K. Titus Memorial Scholarship, c/o Warren-Henderson Farm Bureau®, P.O. Box 348, Monmouth, IL 61462**

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PERSONAL REFERENCE**

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