

Chapter AD P.E.O. High School Scholarship

P.E.O. is a philanthropic organization whose purpose is to promote educational opportunities for women. Chapter AD of Prineville annually offers a local scholarship to women in Crook County who meet the following qualifications:

QUALIFICATIONS FOR APPLICANTS:

- Female
- Be a resident of Crook County during the last two years of high school
- Be a member of the current graduating class and receive an accredited high school diploma or Oregon State diploma by June 30 of the current school year
- Minimum 2.5 GPA
- In need of financial assistance

EACH SCHOLARSHIP APPLICATION MUST INCLUDE THE FOLLOWING:

- The **completed and signed** application form
- Completed financial statement page
- Personal essay. Essay should include educational, career and personal goals; reasons for selecting the institution chosen; extracurricular activities and community involvement; honors received; special interests; and factors that have influenced your life. **Essays must be a maximum of 300 words.**
- Photograph
- Two letters of recommendation:
 - One from school personnel (teacher, counselor or administrator)
 - One from a personal source (cannot be a relative or member of Chapter AD)Recommendations should address scholarship, leadership, social responsibility, potential for future service, evidence of maturity and any special talent or abilities.
- Current official high school transcript.

Applicant will be notified if an interview is requested. Scholarships are awarded on the basis of academic record, financial need, character, and seriousness of purpose.

DISBURSEMENT OF SCHOLARSHIP:

The money will be awarded after the completion of fall term at a vocational institution, college or university and upon received proof of the following:

- Official transcript and grades from fall term showing a 2.5 GPA or better
- Proof of registration for winter term

DEADLINE FOR THIS APPLICATION IS March 1. Please submit application to ASPIRE in the CCHS Future Center by the end of school on this date.

Chapter AD P.E.O. High School Scholarship
APPLICATION FORM

Name: _____ Date of Birth: _____

Address: _____

Cell Phone: _____ Home Phone: _____ E-mail: _____

Father/Guardian: _____ Occupation: _____

Address: _____ Phone: _____

Mother/Guardian: _____ Occupation: _____

Address: _____ Phone: _____

College, University, Business or Vocational school you plan to attend: _____

Field of study you plan to pursue: _____

Names and ages of children in your family: _____

Work experience during your high school years:

Past and/or current employer:

Dates of employment:

Reference letters enclosed:

Name: _____

Phone: _____

Name: _____

Phone: _____

SAT score: _____

ACT score: _____

I certify that my responses are true and factual.

Applicant's signature: _____ Date: _____

