

Corey Schneeman Memorial



Golf Outing & Scholarship Fund

Instructions

The Corey Schneeman Memorial Scholarship Committee will award two \$500 Scholarships to graduating seniors from the class of 2020 that are pursuing a career in the medical field through higher education.

Applicant selection will be based on:

1. Graduating senior planning to pursue a career in a medical field of study
2. Acceptance to a community college, university, or trade school
3. Financial need
4. Meaningful answer to essay question: Why have you decided to pursue a career in the medical field and what specifically would you like to accomplish in your career?
5. Letter of recommendation

The winners of the scholarship will be announced at the Pontiac Township High School Awards Night and funds will be issued to the recipient at the Corey Schneeman Memorial Golf Outing at Wolf Creek Golf Course on June 6, 2020 at 11 am.

Please submit any questions to:

April Schneeman

815-674-6564

aschneeman@pontiac90.org

Corey Schneeman Memorial Scholarship Application

STATEMENT OF ACCURACY FOR STUDENTS

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent, that if chosen as a scholarship winner, the Corey Schneeman Memorial Scholarship and Golf Outing will use my photo to promote the scholarship.

I hereby understand that if chosen as a scholarship winner, I will be present at the 2020 Corey Schneeman Memorial Golf Outing on June 6 at 11am.

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

Signature of scholarship applicant: _____ **Date:** _____

STATEMENT OF SUPPORT BY GUIDANCE COUNSELOR

I hereby affirm that this application meets the criteria set forth by this scholarship program and support submission of this application to Waxhaw Woman's Club Scholarship Program.

Name of Guidance Counselor: _____

High School: _____

Contact information (email and phone): _____

Signature of Guidance Counselor: _____ **Date:** _____

Checklist:

- Application
- Essay on separate sheet of paper
- Guidance Counselor signature
- One letter of recommendation

Turn completed application and all documents into the guidance office at PTHS by April 20, 2020.