

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

1.	Last Name:	First Name, Middle Initial:	
2.	Mailing Address Street: City: State:	Zip:	
3.	Daytime telephone number: () Email address		
4.	Date of birth: Month Day Year	r	
5.	Cumulative Grade Point Average (GPA):		
6.	A. List any academic honors, awards and membership activities while in high school:		
ţ.	B. List your hobbies, outside interests, extracurricular activities and school related volunteer activities:		
ļ	C. List your non-school sponsored volunteer activitie	s in the community:	
7.	Name of community college, university, or trade school attending:		
8.	Anticipated field of study:		
9.	Family gross annual income: Section 20,000		
10.	Please list any other scholarships awarded:		
11.	Name & address of parent(s) or legal guardian(s): (Include address if different than your own listed in Question 2.) Name(s): Street:		
	City: Stat	te: Zip:	
12.	Home phone of parents or legal guardians: On a separate paper, please write an essay (250 - 500)	Work phone:	
12.	Why have you decided to pursue a career in the medical field and what specifically would you like to accomplish in your career?		
13.	One (1) letter of recommendation from a teacher or o	ther professional at PTHS	

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 GUIDANC	E COUNSELOR	ŧ	
I hereby affirm that this application meets the criteria set forth by this scholar application to Waxhaw Woman's Club Scholarship Program.	rship program and	l support submission of this	
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	e office at PTHS	by April 20, 2020.	