

Andover Foundation, Inc.

PO Box 429

Andover, Ohio 44003-0429

A Publicly Supported Charitable Foundation

Scholarship Application

Applicant

Name _____ SSN (last 4 digits) _____

Address _____

Date of birth _____

School:

- Pymatuning Valley High School
- Ashtabula County Joint Vocational School

Expected year of graduation _____

Grade point average for:

9th grade _____ 11th grade _____

10th grade _____ Current _____

Father

Name _____

Address _____

Educational background:

- High school diploma from _____
- Associate's degree from _____
- Bachelor's degree from _____
- Graduate school degree from _____

Occupation _____

Employer _____ Employer phone no. _____

Employer address _____

Mother

Name _____

Foundation Use Only

Received on _____

Considered on _____

Approved _____

Notified on _____

Received: _____

Transcript _____

Counselor letter _____

Acceptance letter _____

Address _____

Educational background:

- High school diploma from _____
- Associate's degree from _____
- Bachelor's degree from _____
- Graduate school degree from _____

Occupation _____

Employer _____ Employer phone no. _____

Employer address _____

Proposed College or University

Name _____

Mailing address for tuition payments _____

Contact person and title _____

Email _____ Phone no. _____

Educational Goals

Degree sought:

- Associate's degree
- Bachelor's degree
- Graduate school degree (specify) _____

Anticipated major _____

Other possible sources of financing:

1. _____
2. _____
3. _____

Required Accompanying Documents

1. Current FAFSA form completed by you and your parents
2. Typed essay (1 page or less), explaining why you wish to continue your education beyond high school
3. 2 letters of recommendation in sealed envelopes, including one from your high school guidance counselor

Miscellaneous

1. This application must be received by the foundation no later than 12:00 noon on 2 March of the current year.
2. You will be notified of the board's decision by 1 April.
3. Any change to the information provided in this application or in any document submitted with it must be reported to the foundation within 14 days of the change.
4. No application fee will be charged.
5. The foundation may request additional information and documentation to make its decision.
6. The information provided in this application is submitted to Andover Foundation, Inc. for its consideration in awarding a scholarship. It is intended for the foundation's use only. The foundation will keep the information contained in this application completely confidential and will not disclose it to third parties, except as provided in this application or compelled to do so by a court of competent jurisdiction.

I have read this scholarship application, I have personal knowledge of the information provided, and I attest to its truth and accuracy, to the best of my knowledge and information.

Applicant

Phone _____

Email _____

Dated _____

We authorize the release of information by the parties stated in this application to the directors of Andover Foundation, Inc., to confirm our representations made in this application and in any other documents submitted in support of it.

If a scholarship is awarded, we will assist the foundation with all reasonable publicity requests. We grant and assign to Andover Foundation, Inc. all our right, title, and interest in and to photographs of us regarding the scholarship award. We agree that the foundation may copyright the photographs, which may be used in any manner the foundation chooses, without compensation to us. The foundation may reproduce the photographs fully, partially, or in composite, or distorted in character or form, and may include them with other photographs, names, and reproductions. All materials using the photographs will become the foundation's property.

Applicant

Father

Phone _____

Email _____

Dated _____

Mother

Phone _____

Email _____

Dated _____