

G. MATTHEW HENRY MEMORIAL SCHOLARSHIP

INFORMATION TO APPLICANT

1. TYPE OF SCHOLARSHIP

- **One year scholarship in the amount of \$1000**
- **Scholarship will be sent directly to the Bursar of the selected College or University**

2. WHO MAY APPLY

- **Any senior boy or girl from Eaton High School who is a current member of the National Honor Society and is ranked in the top 10% of the graduating class**

3. SCHOLARSHIP REQUIREMENTS

- **Applicant must be advancing their education**
- **The College or University selected must be a regionally accredited 4 year institution**
- **Must receive four (4) units of credit in mathematics**
- **Demonstrate by participation in extra-curricular activities and community affairs that they possess the personal, physical, and mental qualifications and attitudes that are requisite to becoming a success**

4. APPLICATION

- **Submit all requested information promptly, neatly, accurately, and honestly**
- **Two (2) Recommendation Forms must be completed**
- **Return to the Guidance Office,**

G. MATTHEW HENRY MEMORIAL SCHOLARSHIP

APPLICATION

NAME IN FULL _____

ADDRESS _____

(Street)

(City)

(State)

(Zip)

AGE ____ DATE OF BIRTH _____ TELEPHONE # _____

Name of college or university you are planning to attend:

- I. Attach a resume describing all important activities, honors, prizes, scholarship ratings, or other recognitions received in high school, in your community, or your church.
- II. Attach a narrative stating your plans for the future.
- III. Attach a copy of your high school transcript.
- IV. Recommendation Forms were given to:

(Name)

(Title or Occupation)

(Name)

(Title or Occupation)

G. MATTHEW HENRY MEMORIAL SCHOLARSHIP

TO BE COMPLETED BY GUIDANCE COUNSELOR,
PRINCIPAL OR SUPERINTENDENT

This is to certify that _____ will
(Applicant Name)

graduate from Eaton High School on _____
(Date)

and ranks _____ in a class of _____ with a grade point

average of _____.

ACT Scores

Composite Math English Reading Science Writing

SAT Scores

Verbal Math Writing

(Signature of School Official)

(Title)

G. MATTHEW HENRY MEMORIAL SCHOLARSHIP RECOMMENDATION FORM

NAME OF APPLICANT _____

Your knowledge of this applicant will assist the Committee in considering his or her qualifications for this scholarship. May we have your recommendation, either from records or personal knowledge, based on the following questions. Your statements will be given considerable weight by the Committee and will be held in strict confidence.

1. Why is this applicant a person you would like to recommend for this scholarship?

2. What are the outstanding traits that qualify this person for consideration (diligence, character, emotional maturity, etc.)?

3. Additional Comments?

I am not related to the above named applicant.

(Signature)

(Title or Occupation)

**PLEASE RETURN THIS FORM DIRECTLY TO THE HIGH SCHOOL
GUIDANCE COUNSELOR**

G. MATTHEW HENRY MEMORIAL SCHOLARSHIP RECOMMENDATION FORM

NAME OF APPLICANT _____

Your knowledge of this applicant will assist the Committee in considering his or her qualifications for this scholarship. May we have your recommendation, either from records or personal knowledge, based on the following questions. Your statements will be given considerable weight by the Committee and will be held in strict confidence.

1. **Why is this applicant a person you would like to recommend for this scholarship?**

2. **What are the outstanding traits that qualify this person for consideration (diligence, character, emotional maturity, etc.)?**

3. **Additional Comments?**

I am not related to the above named applicant.

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