

\*PLEASE TYPE

\*DUE: MARCH 31 OR BEFORE

EVELYN AND RONALD WIRICK FOUNDATION

SCHOLARSHIP APPLICATION

The Evelyn and Ronald Wirick Foundation Scholarships are available for Morenci Area School graduates or graduating senior students, who intend to apply for admission to and demonstrate the desire to successfully complete at least a four year college curriculum. Each year the directors shall determine the number and amount of scholarships to be awarded, which may vary among applicants.

**\*FOR ELIGIBILITY PLEASE TYPE AND FULLY COMPLETE THIS APPLICATION.**

**\*Attach** to this application a copy of your high school grade transcript through the first semester of your senior year, or your **most** recent college transcript of your grades.

**\*Attach** a current dated letter of recommendation from someone other than a family member.

**\*If** you are planning on attending a community college and then furthering your education, please provide your extended college plan. (Note scholarships are intended towards a four year college curriculum.)

Personal Information:

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State & Zip Code

Phone number \_\_\_\_\_

Email address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Name of Parent/Guardian \_\_\_\_\_

Address of Parent/Guardian \_\_\_\_\_

Names & Ages of Brothers & Sisters \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you a graduate or graduating senior of Morenci Area High School? \_\_\_\_\_

What year did you graduate? \_\_\_\_\_ SAT score: \_\_\_\_\_ ACT score: \_\_\_\_\_

Name of college or university you plan to attend. \_\_\_\_\_

Have you been accepted? \_\_\_\_\_ What year of college will you be in? \_\_\_\_\_

Give a breakdown of what it is going to cost for your education this coming year.

Tuition \_\_\_\_\_ Room & Board \_\_\_\_\_

Books \_\_\_\_\_ Other fees \_\_\_\_\_

Explain how you plan to finance your college expense this year.

**Be explicit:**

List scholarship or grants and amounts **confirmed:**

List other scholarships and amounts **applied for:**

What area of study are you in? \_\_\_\_\_

Please state why you have chosen this course of study:

What are your short term goals?

What are your long term goals?

What are some of your most important accomplishments?

List your employment experiences:

| Name of Employer | Type of work |
|------------------|--------------|
|                  |              |
|                  |              |
|                  |              |
|                  |              |

List school and community organizations in which you have participated:

List any honors, awards, leadership positions, etc., you have received or held:

What have you or your family done to improve the Morenci Area Schools or Morenci community?

Give any other information about yourself, your family or your background that you feel would assist in an evaluation of you.

I authorize the selection committee to view my submitted transcript.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent \_\_\_\_\_ Date \_\_\_\_\_

If applicant is under 18 years of age.

Return by March 31 to: High School Counseling Office or Judy Randall  
Morenci Area Schools 812 W Main Street  
Morenci MI 49256