

# The Paul Demshar “Pay It Forward” Scholarship

## Scholarship Application

**DEADLINE for scholarship applications is April 12<sup>th</sup> 2024 (NO EXCEPTIONS)**

### **PURPOSE**

The Paul Demshar “Pay It Forward” Scholarship was established in 2014 in honor of Mr. Demshar who was always looking to help others. The mission of the scholarship is to provide financial assistance to an individual enrolled for undergraduate study in a community college, trade school, college or university that has showed the willingness to help others and pay it forward.

### **SCHOLARSHIP AWARDS**

This scholarship is a one-time award in the amount of \$2,000. The scholarship pays funds directly to the recipient's school.

Areas that are reviewed by the committee include but are not limited to the following: Academic Accomplishments, Community Service, References, Personal Essay and Financial Need.

### **CRITERIA**

- Applicants must be a citizen or legal permanent resident of the United States.
- Applicants must have permanent residence status in Ashtabula County, Ohio.
- Applicants must be completing or have completed high school successfully with a minimum GPA of 2.5 on a 4.0 scale.
- Applicants must be accepted as a full-time student at a college, university, or trade school program for the upcoming academic semester.
- Applicants must demonstrate a need for financial assistance.
- Preference will be given to applicants who have participated in community service programs.
- Student must complete the 2023-2024 Federal Student Aid Application (FAFSA). Type or print legibly.
- Applicants must complete and submit a Scholarship Application by April 12, 2024.

### **APPLICATION PROCESS**

#### **NEW SCHOLARSHIP APPLICANTS MUST PROVIDE:**

- Completed application form.
- Official high school transcript in a sealed envelope from their school.
- Two academic references from a guidance counselor or teacher.
- A letter reference from an employer or other community member.
- Proof of acceptance to an academic, vocational or technical school for post-secondary studies.

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Please **type on a separate sheet** or **print** your answers below. If application is illegible it will be returned to you. If any question does not apply to you in this application please put N/A in that space.

1	Last Name:	First Name:
2	Mailing Address: Street: _____ City: _____ State: _____ ZIP: _____	
3	Daytime Telephone Number: (     ) _____ Email address: _____	
4	Current High School:	GENDER M / F
5	I will be attending the following school in the <u>Fall of 2024</u> : _____ Address/ Phone _____	
6	Grade Point Average (GPA): _____ (On a 4.0 scale) Attach proof of GPA; your most recent <b>official</b> school transcript required.	
7	ACT Score: _____ Or SAT Score: _____ A copy of your ACT or SAT score sheet on official high school transcript is required.	
8	Name & address of parent(s) or legal guardian(s): Use reverse side of application if you need more space. Name (s) _____ Street: _____ City: _____ State: _____ ZIP: _____  Phone of parents or legal guardians: _____	

**Please list the following information. Use a separate sheet if needed.**

9	<b>SCHOOL EXTRA-CURRICULAR ACTIVITIES:</b> Please list school extra-curricular activities in which you have participated. Note leadership roles and dates.
10	<b>AREA OF STUDY:</b> What do you want to study and why?
11	<b>ORGANIZATIONS:</b> Please list community organizations such as service, volunteer and religious organizations in which you are now active or have previously been active. Note leadership roles and dates.

12	<b>RECOGNITIONS:</b> Please list important awards and recognitions received. Note organizations presenting honor and date.
13	<b>GOALS:</b> What are the short and long term goals for your life?
14	<b>NEED:</b> Please explain your need for the Scholarship
15	<b>CAREER PLANS:</b> What are your career plans and what would you like to be doing in 10 years?

16	A. The following items must be attached to this application in order for the application to qualify to be reviewed by the scholarship committee.		
	B. Your application will be returned to you if these items are not attached to this application. (No exceptions.)		
	C. Circle "YES" or "NO" to be sure you have attached each item as required.		
	YES	NO	
	YES	NO	<b>Two reference forms.</b>
	YES	NO	<b>Proof of college acceptance or current student enrollment.</b> A letter of college acceptance or program acceptance is required for receipt of funds.
	YES	NO	<b>Most recent <u>official high school or official college transcript.</u></b>
	YES	NO	<b>Answers to questions 1-16</b>

**STATEMENT OF ACCURACY**

hereby affirm that all the above stated information provided by me to Scholarship Committee is true, correct and without forgery. I also consent that my picture may be taken and used for any purpose deemed necessary to promote the Scholarship Program.

hereby understand that if chosen as a scholarship winner, according to scholarship policy, I must provide evidence of enrollment/registration at the post-secondary institution of my choice before scholarship funds can be awarded. All funds will be paid directly to the school.

Signature of scholarship applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Witness \_\_\_\_\_ Date: \_\_\_\_\_

**The deadline for this application to be received by is April 12, 2024.  
No exceptions!**

Applications may be dropped off at the Demshar-Eaton Office 1515 E 46<sup>th</sup> Street Ashtabula, OH 44004