

**DELPHIA WARREN
LEADERSHIP SCHOLARSHIP**

Each year students from Muskogee County Schools will be given the opportunity to apply for a leadership scholarship of \$500 per semester for a total of eight semesters. The recipients must maintain enrollment in an accredited post-secondary college, university or vocational school that offers associate degrees or higher and maintain a grade point average above 2.5. This is a scholarship program of WaterStone (Tax ID 75-1750059) and is coordinated through Melissa Goodman-Nissley's office in Muskogee, Oklahoma. Recipients are selected by a non-partial selection committee.

INSTRUCTIONS FOR APPLYING

Please read the following points carefully. Failure to comply may be the cause for disqualification. All submissions must be typewritten or printed and in the following order. All materials **MUST** be submitted under one cover and stapled in the top left-hand corner. Materials sent in multiple mailings will not be accepted.

1. Completed Application
2. Personal Statement: 100-300 words, indicating your chosen field of study. How do you see yourself as a leader in your area of aspiration? State your reasons for these choices. Include pertinent experiences, activities and accomplishments.
3. References: three references; one from an educator, one from clergy and one of your choice such as an employer.
4. Official High School Transcript (Remove transcripts from envelope.)
5. FAFSA: Submit a copy of a free application for Federal Student Aid (www.fafsa.ed.gov).

Your application must be postmarked no later than March 10.

Mail to: Delphia Warren Scholarship
3608 S. Cherokee Drive
Muskogee, OK 74403
Telephone: 918-683-2477

DELPHIA WARREN SCHOLARSHIP APPLICATION

APPLICANT INFORMATION

Full Name _____ Date _____
Home Address _____
City _____ State _____ Zip _____
Email Address _____ Phone _____

GENERAL INFORMATION

Father's Name _____ Check if deceased

Home Address _____

City _____ State _____ Zip _____

Mother's Name _____ Check if deceased

Home Address _____

City _____ State _____ Zip _____

Do you have a step-parent or guardian other than your parents? Yes No

If yes, Name _____

Home Address _____

City _____ State _____ Zip _____

College/University/Vocational School you plan to attend (must offer an Associate Degree or higher)

Name _____

Address _____

City _____ State _____ Zip _____

Have you been accepted? Yes No *If yes, attach copy of acceptance letter.*

LEADERSHIP POSITIONS AND VOLUNTEER ACTIVITIES

List by name and year (9, 10, 11, 12) leadership positions/offices held and volunteer activities (school, church, community, etc.) along with the approximate monthly time commitment of each. *Attach a sheet with any additional information that space does not allow.*

Examples: Student council president (12; 2.5 hrs/month); Hospital volunteer (11, 12; 25 hrs/month)

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MEMBERSHIPS

List by name and year memberships and other participation along with the approximate monthly time commitment of each. *Attach a sheet with any additional information that space does not allow.*

Examples: Basketball (9, 10, 11; 35 hrs/month); Cheerleading (11, 12; 20 hrs/month)

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HONORS AND AWARDS

List by name and year the honors and awards you have received during high school. *Attach a sheet with any additional information that space does not allow.*

Examples: National Merit Scholar (12); National Honor Society (12); Hospital Volunteer of the Year (12)

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EMPLOYMENT

List the names and addresses of employers, including family business or self-employment. Indicate whether part-time, summer, or full-time, with the hours you work. *Attach a sheet with any additional information that space does not allow.*

SCHOOL CONTACT

Fill in the following completely with your high school information.

School Name _____

Address _____

City _____ State _____ Zip _____

Principal's Name _____

SIGNATURES

I authorize my school officials to give information about my academic records. Yes No

To the best of my knowledge, the information presented on this application is complete and true.

Applicant printed name

Applicant signature

Date

Parent/guardian printed name

Parent/guardian signature

Date