



Alice E. Kear Scholarship Application

Established 2000

According to the wishes of Ms. Kear, “The earnings of this Scholarship Fund shall be awarded annually as a scholarship grant to a member of the graduating class of Pottsville Area High School and a member of the graduating class of Minersville Area High School who will attend a college or university where he, she or they will major in the study of music. The graduate selected shall be chosen primarily based upon his or her musical achievements, with secondary consideration given to scholastic achievement, leadership ability, and community involvement.”

This Scholarship shall be paid in four equal parts, each year one part will be paid directly to the college, provided the student continues to major in musical studies and maintains at least a 3.0 cumulative point average in his/her academic studies, except that in the first year the payment shall not be made until the student has completed his/her first semester of schooling. Each recipient must complete a Student Release Form annually and submit a transcript to ensure that he/she is continuing his/her musical education. If the student fails to return the Student Release Form and/or is no longer pursuing music his/her scholarship shall be forfeited.

Criteria:

- Graduating high school senior of Pottsville Area High School
- Pursue a major in the study of music in college
- Musical achievements
- Secondary consideration given to scholastic achievement, leadership ability and community involvement
- Must maintain a 3.0 cumulative grade point average while in college

All applications must be returned to the Guidance Office at the address listed below by April 1st.

Please be aware that there cannot be any exceptions to established deadlines.

**Pottsville Area High School
16th Street and Elk Avenue
Pottsville, PA 17901
(570) 621-2962**

Alice E. Kear Scholarship Application

Applicant Data

Name: Last:	First:	Middle Initial:
Address: Street:		Apartment:
City:	State:	Zip:
Phone: ()	E-mail:	
Social Security Number (for purposes of PHEAA Path Program):		

High School Data

1. Applicants must submit a copy of their transcript of grades as of the completion of their junior year.
2. Applicants must have the following completed by a school official.

Applicant ranked	in a class of	at end of junior year.
Cumulative G.P.A. at completion of first semester, senior year:		
SAT Scores: (CR) Critical Reading	(M) Math	(W) Essay
School Official's Signature:	Date:	
Title:		
School Address:		
City:	State:	Zip:

Activities, Awards and Honors

List all school activities in which you have participated during the past four years (e.g., student government, music, sports, etc.). Indicate all special awards, honors and offices held. Use an additional sheet, if necessary.

Activity	No. of Years Participated	Offices Held	Special Awards, Honors

Work Experience

List your work experience during the past four years. Use an additional sheet, if necessary.

Company	Position	Dates		Hrs./Week	Amount Earned/Week
		From – Mo/Yr	To – Mo/Yr		

Post-Secondary School Data

Name of the post-secondary school for which financial aid is requested. If unknown, please list in order of preference where applications have been sent.

School: _____ City: _____ State: _____

School: _____ City: _____ State: _____

Check One: Four-year College or University Trade/Technical School Other

Major or course of study: _____

Unusual Circumstances

Please report any family, personal or financial circumstances which you think warrant consideration; e.g., financial hardship, disabilities, family separation, unusual family responsibilities.

Aspirations and Goals

Make a statement of your plans as they relate to your educational and career objectives and future goals. Statement must be typewritten, double-spaced and should not exceed two pages. Statement must include your name.

Application Checklist

This application for a scholarship becomes complete and valid only when you have returned:

- 1. Completed application
- 2. Statement of Aspirations and Goals
- 3. Transcript of grades as of completion of junior year

Certification

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.

Applicant's Signature: _____ **Date:** _____

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Applications and recommendation for scholarships **must be submitted by the Pottsville Area High School Guidance Department** to Schuylkill Area Community Foundation, 216 South Centre Street, Pottsville, PA, 17901 (Phone number 570-624-7223) by May 1st.