

## M.J.'s MEMORIAL SCHOLARSHIP

This scholarship was established by Arthur P. and Ronda Hipwell in memory of Art's sister, Mary Jane Hipwell, and in honor of the leadership of the first Assumption President, Mary Lee McCoy. Mr. Hipwell was a member of Assumption High School's Board of Directors and a long-time supporter of Catholic education before his death. This scholarship will be awarded to an **incoming freshman** demonstrates need and applies for aid based upon the school's formal financial aid application process. She must also maintain a B average, demonstrate leadership, and plan to attend Assumption next year. The scholarship may be renewed as long as the student attends Assumption and continues to meet the criteria all four years.

A \$2,000 scholarship is awarded annually to an incoming freshman whose family demonstrates need and applies for aid based upon the School's formal financial aid application process.

1. Maintains a B average
2. Demonstrates leadership in the classroom or in the community
3. Completes a typed essay
4. Provides two written references

Students who apply must be role models in helping to preserve the charism of the Sisters of Mercy by providing encouragement and leadership to their classmates and members of the community.

### APPLICATION PROCESS

The attached application, along with a typed essay and two references must be completed and submitted to **jackie.boyd@ahsrockets.org by 4:00 p.m., Wednesday, February 13, 2019**. The essay should explain why the student feels she fits the above criteria, including how she demonstrates academic achievement and leadership in classroom or in the community. The essay should be two to three typed double-spaced pages.

### APPLICATION DEADLINE

**DEADLINE** – Submit to **jackie.boyd@ahsrockets.org by 4:00 p.m., Wednesday, February 13, 2019**. You will receive a confirmation email within 24 hours. **IF YOU DO NOT RECEIVE A CONFIRMATION EMAIL** you must contact Jackie Boyd at 271-2511 within 24 hours of the deadline. The winner will be announced at the End of the Year Celebration currently scheduled on May 20, 2019.

*M.J. 's Memorial Scholarship*

APPLICATION

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City, State Zip: \_\_\_\_\_

In your typed essay, please provide the following information:

- How your family is involved in Catholic education
- How this scholarship would help your family
- List brothers/sisters ages and the Catholic school they attend
- Examples of how you demonstrate leadership in your class or community
- Hobbies/interests and extracurricular activities (clubs and/or sports)
- Community activities (church and/or service)
- Aspirations for the future

Also, on the attached sheet please list the following two references:

- One academic reference from a faculty member or administrator who can attest to your grades and class participation
- One personal reference who can attest to your involvement in church, sports, or co-curriculars

Once complete, please have your parents sign your application and send to:

jackie.bloyd@ahsrockets.org by **4:00 p.m., Wednesday, February 13, 2019**. You will receive a confirmation email within 24 hours. **IF YOU DO NOT RECEIVE A CONFIRMATION EMAIL** you must contact Jackie Bloyd at 271-2511 within 24 hours of the deadline. The winner will be announced at the End of the Year Celebration currently scheduled on May 20, 2019.

**REFERENCES**

**(1) Academic Reference:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

**Name (Print):** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**(2) Personal Reference:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

**Name (Print):** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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This application in its entirety (including all pages and any attachments) is true and accurate to the best of my knowledge. I understand that as a prerequisite for the scholarship, my family must apply for financial assistance at Assumption. If chosen for this scholarship, I agree that I will continue to maintain a 2.5 GPA, demonstrate leadership and be a good role model for my classmates.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

If chosen, I support my daughter's participation in this program and understand that failure to meet any of the scholarship criteria could result in the loss of approved funding.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(References may be typed on a different sheet of paper and emailed directly to [jackie.bloyd@ahsrockets.org](mailto:jackie.bloyd@ahsrockets.org))