

ROSEMARY POOLE ROUSE MEMORIAL SCHOLARSHIP

AWARD GUIDELINES

The family and friends of Rosemary Poole Rouse hereby establish an endowed scholarship to benefit a graduating student from Baker High School who is to attend Oregon State University.

The following general guidelines shall control selection of the scholarship recipient:

1. The student must be a graduate of Baker High School
2. The student must have committed to Oregon State University.
3. The student must have a high school Grade Point Average (GPA) sufficient to gain admission to Oregon State University (3.0 GPA.)
4. Academic achievement, extracurricular activities and financial need are all important considerations in granting the award.

The annual scholarship will be awarded at the Baker High School Spring Senior Honors and Awards night in May and annually thereafter.

Letters of recommendation need to include the following information about the applicant:

- Please include information on the applicant's character, integrity, and leadership as you have seen it demonstrated in the classroom and in high school.

Before an applicant is eligible for consideration, a completed application form, official transcript, and two teacher recommendation letters must be submitted to the Baker High School Guidance Office: **NO LATER THAN 5:00pm on April 15, 2019.** The applicant should be available for a personal interview if requested by the Selection Committee.

The Oregon State University Foundation will control the principal of the Fund by investing or reinvesting maximize income. The principal of the gift shall be held in perpetuity and used in such a manner as it may be best determined for the benefit of Oregon State University and Baker High School graduates.

ROSEMARY POOLE ROUSE SCHOLARSHIP FUND APPLICATION FORM

Name: _____

Home Address: _____

Parent(s)/Guardian(s): _____

_____ Date

_____ Home Phone

_____ Social Security Number

_____ Date Admitted to OSU

_____ Grade Point Average

ACTIVITIES:

HONORS AND ACHIEVEMENTS:

STATE HOW YOU AND YOUR FAMILY PLAN TO FINANCE YOUR COLLEGE EDUCATION:

Applicant's Signature

Parent's Signature

High School Counselor Signature

_____ Date

_____ Date

_____ Date

Note: If more space is needed, feel free to attach additional documentation

**ROSEMARY POOLE ROUSE SCHOLARSHIP FUND
TEACHER RECOMMENDATION FORM**

NAME OF APPLICANT: _____

Your evaluation of the personal characteristics and abilities of the applicant will provide important information for the Scholarship Committee. Please include information on the applicant's character, integrity, and leadership as you have seen it demonstrated in the classroom and in high school activities.

Signature and Position

Date

