

WAESS STUDENT SCHOLARSHIP

GUIDELINES FOR THE SCHOLARSHIP PROGRAM

The Wyoming Association of Educational Support Staff (WAESS) sponsors this scholarship award program. The program awards one Wyoming 2020 high school graduate and degree seeking student a scholarship in the amount of \$500.00 during the 2019-20 school year. The award which may be used to help pay for any expenses incurred at a community college/university of his/her choice within the State of Wyoming.

1. **SELECTION OF A RECIPIENT** will be based on the following: (a) need for financial assistance, (b) initiative, (c) scholastic achievement, and (d) quality and completeness of application materials. The scholarship is open to any student on the basis of qualifications. Preference may be given to a son/daughter of a WAESS member (in good standing) if he/she meets the eligibility requirements.
2. **TO QUALIFY** a candidate must (a) be a graduating high school senior, (b) have maintained a "C" (2.0 GPA) average or better in high school, (c) plans to enroll at a college or university in Wyoming as a full-time student during the term following the awarding of the scholarship, (d) be a resident of Wyoming as well as a citizen of the United States.
3. **TO APPLY** a candidate must submit the following: (a) completed application form, preferably typed, (b) a one-page essay about his/herself and why he/she is pursuing a college degree, preferably typed, (c) a letter of recommendation from an adult, other than a family member, who knows the applicant and his/her qualifications, and (d) an official signed transcript with current class rank and GPA.
4. **RETURN ALL ITEMS** listed in Section 3 to the Scholarship Committee Chairman **POSTMARKED NO LATER THAN MARCH 15**. Materials can be sent by regular mail, email, or returned in person. Materials will not be returned to the applicant.
5. **THE WINNER WILL BE SELECTED BY THE** Scholarship Committee by 4th Friday in April. The Scholarship Committee Chairman will notify the winner and respective high school. An alternate will be selected should the candidate chosen to receive the scholarship be unable to use it. The next highest rated applicant will be awarded the scholarship.
6. **PAYMENT OF SCHOLARSHIP FUNDS:** The winner must submit a college acceptance letter and class schedule to the Scholarship Chairman. The funds will then be disbursed directly to the college before the fall semester registration begins.

7. **MAXIMUM VALUE OF SCHOLARSHIP FUNDS:** One scholarship will be approved during any one school year with a maximum value of \$500.00, provided funds are available.

8. **QUESTIONS** should be directed to the Scholarship Committee below:

Name School Phone Email

Thanya Castellon Transitions 307-253-3199 thanya5557@myncsd.org

Charmin Minahan NCS D Central Services 307-253-5369 charmin4853@myncsd.org

Annette Ambrosino Kelly Walsh 307-253-2042 annette313@myncsd.org

Amy Sherwin Natrona County High School 307-321-3323 amy5147@myncsd.org

**WYOMING ASSOCIATION OF EDUCATIONAL SUPOPRT STAFF
STUDENT SCHOLARSHIP APPLICATION**

1. Applicant's full name

2. Applicant's address

(Street/mailling address) (City & State) (ZIP)

3. Date of birth Age Sex Phone

4. Name of high school you now attend

5. Address of high school you now attend

6. Father/Guardian Name Phone

7. Father/Guardian Address

(Street/mailling address) (City & State) (ZIP)

8. Father's occupation Place of employment

9. Mother/Guardian Name Phone

10. Yearly gross household income Number of children attending college

11. Applicant's proposed program of study

12. Are you employed? Yes No If yes part-time full-time

13. Place of employment Type of work

14. List of relatives who are members (in good standing) of WAESS and their relationship to you

15. Please state the reason(s) why you need financial assistance to attend college

16. Describe your extracurricular, volunteer, and work activities

Activity	Hours / Weeks per wk / per yr	Positions held, honors won, awards earned

17. List academic honors and scholarships won or have applied

Honors & Scholarships Date of award Monetary value, if applicable

18. Use this space to provide additional information you feel would be of interest to the Scholarship Committee

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Please read and sign the honor statement.

CERTIFICATION

I hereby certify that the answers and statements contained in this application are true to the best of my knowledge. I also certify that this application, including any short answers and essays, is my own work. I understand that I may be disqualified from this scholarship award if any statements or documents have been intentionally fabricated.

Applicant's signature Date

Send application package to: Thanya Castellon, Scholarship Chairman

Natrona County School District
920 South Beverly Street
Casper, WY 82601 Email:
thanya5557@myncsd.org

(Revised 11/21/2019)