

Philip Weber, Jr. Leadership and Academic Award SCHOLARSHIP APPLICATION (Letter of Recommendation 2 Required)

2024

You must either type or print all your answers neatly in ink. Application response may be sent via email to **Joanne Weber Catron** catronje@ccps.k12.va.us or **600 David Bruce Ave, Charlotte Court House, VA 23923**. **Scholarship application, and letters of recommendation must be postmarked by April 26, 2024 to the above address.**

The Philip Weber, Jr. Scholarship for Leadership and Academics is available to all high school seniors or college students that have demonstrated strong leadership characteristics as well as outstanding academic achievement. This scholarship is offered to students who are majoring in education or business. Notification to recipients will be sent out as soon as the committee decision has been made. Scholarship consideration will be based on a rating scale, which will include thoroughness of comments, information verification and explanation, presentation of materials and financial need. The scholarship award amount is \$5000.000

1. Name _____, _____ M.I.
Last First

Permanent mailing address

_____ Number and street

_____ City _____ State _____ Zip _____ E-mail _____

Phone _____ Birth date _____
Month Day Year

Social Security Number _____

Present School _____

3. High school students **ONLY**:

High School GPA:	
Rank in class:	
No. students in class:	
ACT scores:	
SAT scores:	
National Honor Society:	Y / N

Other scholastic recognition:

Which subjects are you especially interested in?

Extra-curricular activities at school:

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Career goals:
Employment history:
School-based community service involvement (List # required hours and # hours completed, required or not. Include details about your major activities):
Other volunteer community service involvement (List current # hours and activities):

4. Current College Students **ONLY**:

College GPA through January 2024: Undergraduate GPA....._____ Graduate GPA _____

College or
Univ. attended

Name of College or University _____ Dates Attended _____ Degree Earned _____

5. **Applicant must have registered at a college, university, or two-year college.**

School choice
For 2024-25

School Name:	
Address:	
Major Field of Study:	

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6. Are you currently working 20 hours or more per week? Yes/No [Y/N]..... _____

Do you plan on working 20 hours or more per week during the 2024-25 school year? Yes/No [Y/N] _____

7. Letters of Recommendation: Please provide one letter from a school administrator/teacher, the second letter can be from whomever you choose.
8. Print or type an essay and include it with your application. The essay must be original thoughts of the applicant, in the applicant's own words, written by the applicant.

CONFIDENTIAL FINANCIAL DATA

University/College you are planning to attend:	
Where will you live while attending school?	

Estimated Annual Costs for the Academic Year (9 months)	Tuition	\$
	Room/Board	\$
	Books	\$
	TOTAL	\$

Anticipated Annual Financial Support during College	Expected family contribution for the next academic year	\$
	Expected student contribution for the next academic year	\$

CERTIFICATION. ALL APPLICANTS: I certify that all information I have provided on this form is true and complete to the best of my knowledge. I agree to give proof of the information on this application if requested. I give permission to selection committees to review information on this form, my transcripts, and any additional supporting documentation submitted as part of this application. I give permission for selection committee to contact high school and/or college officials for additional academic information.

Signature _____

Date _____

Applicant's Name _____