

# Community Foundation of the Quincy Area Scholarships

## The Becky Swisher Crowe Memorial Scholarship

This scholarship was established in memory of Becky Swisher Crowe who taught in the Quincy Public Schools from 1970-1979. Becky was killed in an automobile accident on her way to school the morning of March 9, 1979. She taught at both Quincy Junior High School and Quincy Senior High School.

<b>Eligibility Criteria:</b> <ul style="list-style-type: none"><li>• Graduate of Quincy Senior High School</li><li>• Students must attend a two-year, four-year, or community college</li><li>• Students must intend to pursue a degree in <b>Education</b>.</li><li>• Students must display <b>financial need</b>.</li><li>• Students must have a minimum GPA of <b>3.0</b>.</li><li>• Two letters of recommendation required from adults who know the applicant well.</li><li>• Typed essay required. Minimum of 200 words.</li><li>• Applicant must be of good character and display good citizenship.</li><li>• Please attach unofficial copy of seventh semester transcript, and current class schedule.</li></ul>	Scholarship Amount: <b>\$1,000*</b>
	<b>Deadline:</b> <b>March 8, 2021</b>

<b>Essay Prompt:</b> <ul style="list-style-type: none"><li>• Please include a typed, 200-word minimum essay on the following:<ul style="list-style-type: none"><li>○ Why you are choosing the field of education</li><li>○ Any unique experiences that would support a career in education</li><li>○ A statement of future goals</li><li>○ Any special qualities you may possess</li></ul></li></ul>
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\*Value of scholarship is subject to change

# The Becky Swisher Crowe Memorial Scholarship Fund Application

Please **print** your answers in black or blue ink.

1.	First Name: _____	Last Name: _____
	Mailing Address: Street: _____ City: _____ State: _____ ZIP: _____	
	Name of Parent(s) or Legal Guardian(s):  Names & Ages of Siblings:  Number of Family Members Attending a Post-Secondary Institution in 2021-2022:	
2.	Name & Location of the Post-Secondary Institution You are Attending in the Fall of 2021:	
	Intended College Major:	
	Overall Career Goal:	
	Total Approximate Cost of Attendance to chosen Institution for one School Year:	
3.	Grade Point Average (GPA): _____ / 4.0 Scale	
	Class Rank: _____ / _____	
	SAT Score: _____ OR ACT Score: _____	
4.	List other financial assistance you will receive for the 2021-2022 school year:	
	A.	Grants: _____ Amount: \$ _____
	B.	Scholarships: _____ Amount: \$ _____
	D.	Other Financial Resources: _____ Amount: \$ _____
Comments:		

In lieu of answering items 5-7, you may attach a resume with your application.

5.	School Activities (Athletics, Clubs, Organizations, etc.):		
	<u>Activity</u>	<u>Years Active</u>	<u>Role/Leadership Positions</u>
6.	Out of School Activities (Church, Scouts, Volunteering, etc.):		
	<u>Activity</u>	<u>Years Active</u>	<u>Role/Leadership Positions</u>
7.	Work Experience:		
	<u>Name of Employer</u>	<u>Dates Employed</u>	<u>Job Duties:</u>
8.	<u>Approximate Family Income</u>		
	_____ Less than \$15,000	_____ \$35,001 - \$45,000	_____ \$65,001 - \$75,000
	_____ \$15,001 - \$25,000	_____ \$45,001-\$55,000	_____ \$75,001 -\$100,000
	_____ \$25,001 – \$35,000	_____ \$55,001- \$65,000	_____ Over \$100,000

**Due Monday, March 8, 2021 to Mrs. Briscoe in the Main Office**

