

Organization of Triangles

2016 Rose E. Scherer Scholarship Application Form

Part 1 - Applicant Information:

Last Name: _____ First: _____ Middle Initial: _____

Street Address: _____ Apartment #: _____

City: _____ State: _____ Zip Code: _____

Phone Number: () _____ Email: _____

Part 2 - High School Data:

School Name: _____ City: _____ State: _____

Current GPA: _____ Expected date of graduation: _____

Part 3 - College/University Data:

School Name: _____ City: _____ State: _____

Major or course of study you plan to/currently pursue: _____

Part 4 - Triangle Data:

Name of Triangle: _____ Date of Initiation: _____

Offices held: _____

Part 5 - Additional Information:

List all awards and honors received from schools, sports, volunteer work, scouts, etc)

<u>Group Name</u>	<u>Award Received and why</u>	<u>Number of Years Active in Group</u>
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Part 6 – Essay Question: (350 to 500 words)

“I alone cannot change the world, but I can cast a stone across the water to create many ripples.” —Mother Teresa

Explain how you have worked together with the sisters and/or advisors in your triangle to make changes in your membership, fundraising and other areas of your chapter. What impact do you feel you made or where did you open up “doors” for further improvement in the future?

Part 7 – Applicant's Certification

I acknowledge that the decision of awarded scholarships is final. I certify that I meet the eligible requirements as outlined in the Rose E. Scherer Scholarship Eligibility Rules and Guidelines. In addition I certify that the information supplied is accurate.

Applicant's Signature: _____ Date: _____

Part 8 – Junior Deputy Certification:

I certify that the above scholarship applicant is a member in good standing within the Organization of Triangles.

Junior Deputy: _____ Date: _____
(signature)

(print name)

APPLICATION DEADLINE- POSTMARKED MARCH 15, 2016

Send completed applications to:
Mrs. Nicole Thomsen
10 Dogwood Dr. - South Glens Falls, NY 12803
518-321-6840 with any questions