GUIDELINES of the Waterville Fire Association and Carl Conrad Memorial Scholarships

- The student shall currently reside in the City of Waterville Fire District response area (if you are unsure if you reside in the response area, feel free to contact the Waterville Fire Department at 419-878-0165. Not specifically limiting the scholarship to a student of Anthony Wayne High School).
- 2) Applications shall be made available through the Waterville Fire Association, and/or through the High School Guidance Counselors.
- 3) The applicant must be a graduating senior.
- 4) The scholarships will consist of cash awards from the Waterville Fire Association and from the Carl Conrad Memorial. (Award money will be disbursed directly to the College or University).
- 5) The award shall be presented at the City of Waterville's Council Meeting **June 9**, **2025** at 7:30pm.
- 6) The application deadline will be April 4, 2025 by 7:00pm.
- 7) The finalists, as chosen by the scholarship committee, shall participate in an interview with said committee as part of the final determination of the winner.
- 8) Verification of enrollment and acceptance will be required before the award money is disbursed to the College or University.
- 9) Return Applications to:

Waterville Fire Department c/o Scholarship Committee 751 Waterville-Monclova Rd. Waterville, Ohio 43566

WATERVILLE FIRE ASSOCIATION AND CARL CONRAD MEMORIAL SCHOLARSHIP APPLICATION

, hereby understand that

Ι,	, hereby understand that
the Memorial Scholarships will be as	warded to a High School Senior
who resides in the Waterville Fire D	district response area, (11 you
are unsure if you reside in the respe	onse area, feel free to contact
the Waterville Fire Department at	119-8/8-0165. Not specifically
limiting the scholarship to a st	udent of Anthony Wayne High
School). I understand that if ch	nosen as a finalist, 1 will
participate in an interview with the	e Scholarship Committee as part
of the selection process.	
I understand that the amount of to chosen, will be paid directly to to verification of enrollment for my f	he College or University upon
If I am chosen as the recipient of be asked to attend the June 9th Co-Waterville, to receive this Award.	a Memorial Scholarship, I will uncil meeting, of the City of
DATE	SIGNATURE

PERSONAL INFORMATION

Name:
Address:
Phone: Date of Birth:
Student I.D.# from College or University to be attending :
COLLEGE or UNIVERSITY PLANS
Name of College or University you plan to attend:
Have you applied?
Application pending?
Have you been accepted?
Do you have an occupational choice?
If yes, what is your choice?
ELIGIBILITY Grade point average: Class rank: Please include verification of G.P.A. from your counselor
College prep courses taken in the following: Math:
Science:
English:
Social Studies:
Foreign Language:
Academic honors/awards received:

COMMUNITY and SCHOOL ACTIVITY

Community Organizations:		
School Clubs:		
Leadership roles in above activitie	s:	<u> </u>
	CHARACTER	
You must obtain one <u>(1)</u> written o <u>immediate family).</u>	character reference from a personal source (other t	<u>'han</u>
	<u>FINANCIAL</u>	
What is the projected first year co (Tuition, Room, Board, and Book	sts? \$ (s)	
Do you have a brother or sister att <i>If yes</i> , who and where?	ending College?	
Have you received any other Scholf yes, what amount?	larships to date?	
Are you employed?	If yes, where?	
Father's occupation:	Employer:	
Mother's occupation:	Employer:	B ************************************
If you are awarded one of these S of the cost of your first year in co	cholarships, how do you intend to finance the remainlege?	inder
		Day and the state of the state
1100		·