

DENISE NICHOLS MEMORIAL SCHOLARSHIP

Scholarship Information and Application Instructions

This scholarship is designed to honor the memory of Denise Nichols while helping support graduating seniors in McCulloch County schools who plan to attend a junior college, university, vocational, technical or trade school. The scholarship is intended to offset expenses associated with tuition and fees required for registration and/or textbooks for classroom instruction.

One scholarship will be awarded to a student in the Brady, Lohn or Rochelle School districts in the amount of \$750.00. When an award is made to a student, the recipient is responsible for providing proof of enrollment in the school of their choice and should submit a receipt of payments made in order to receive the scholarship funds.

ABOUT DENISE NICHOLS: Denise was born in Lubbock on April 6, 1967 and moved to McCulloch County in 1985. She was a member of the First United Methodist Church, former board member of the Brady/McCulloch County Chamber of Commerce and was active with Ladies Golf Association of Brady. She was an employee of Brady National Bank when she passed away suddenly on August 22, 2010. This scholarship is given in memory and honor of Denise.

Requirements for receiving the scholarship:

- Must volunteer during the Denise Nichols Memorial Duffers Golf Tournament at Brady Municipal Golf Course date TBD.
- Must submit a complete personal statement, application and one letter of recommendation (from a different counselor, teacher, coach, employer/supervisor who did not complete the appraisal.)
- Students must have a minimum 2.5 GPA

In addition to the attached application, please submit a typed personal statement titled "Denise Nichols Memorial Scholarship Request". The statement should be 500-750 words in length and include:

- · Personal introduction and name of the school you plan to attend
- Academic and career objectives
- Community service in which you may have been involved
- Special honors and awards you may have earned
- Outside activities and family commitments
- Other personal information which you would like to share

<u>Scholarship deadline is May 15th</u> for the 2020 award and will be reviewed by the Denise Nichols Memorial Scholarship Committee. Scholarship applications should be addressed to:

Brady/McCulloch County Chamber of Commerce 405 S Bridge Street Brady TX 76825

Scholarship awards will be awarded on May 20th,

Students who receive the award will write a letter to the Denise Nichols Memorial Scholarship committee giving an account of how the scholarship funds were spent and should detail their academic activities and learning experiences related to receiving the award. These letters will be due to the committee no later than May 30, 2021 and will be shared with the Nichols family during the 2021 golf tournament.

COMPLETE FORM ATTACHED: Please type or print all information (except signatures – please sign the application).

APPLICATION: DENISE NICHOLS MEMORIAL SCHOLARSHIP (\$750.00)

Applicant Information		
LAST NAME:	FIRST NAME:	
MAILING ADDRESS:	CITY/STATE/ZIP:	
EMAIL ADDRESS:	PHONE NUMBER:	
DATE OF BIRTH:	HIGH SCHOOL:	GPA:
Parent/Legal Guardian & Household Information		
NAMES:	RELATIONSHIP TO APPLICANT:	=
ADDRESS:	PHONE NUMBER:	
EMAIL ADDRESS:	OCCUPATION(S):	
# OF CHILDREN IN HOUSEHOLD (please list ages, too):		
Post secondary information: Provide the following inform	ation on school you plan to attend.	
NAME OF SCHOOL:	LOCATION (CITY/STATE):	
□ Vocational, Technical or Trade School		
□ 2-year Community or Junior College		
□ 4-year College or University		
□ Other (please explain):		
Intended course of study, certification or major degree:		
Anticipated degree and graduation date:		
Extracurricular Activity Information: List all school and co	mmunity volunteer activities vou partic	pated in

Extracurricular Activity Information: List all school	l and community volunteer activities you participated in
during high school. Do not list employment here.	

ACTIVITY	# OF YEARS PARTICIPATED	SPECIAL AWARDS/HONORS	OFFICES HELD	NAME OF ADVISOR/COACH/TEACHER
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Employment Information: Describe any work experience you have.

DATES OF EMPLOYMENT	POSITION	HOURS WORKED PER WEEK	NAME OF SUPERVISOR
		I POSITION	DATES OF POSITION WORKED

APPLICANT APPRAISAL: To be completed by a high school counselor, teacher, or work supervisor who knows you well and has agreed to complete this section on your behalf. Only one person should complete the appraisal. This appraisal should be completed in addition to the separate required letter of recommendation.

<u>APPRAISER</u>: Please review the following statements and mark a score for the application who has asked you to complete this assessment on a scale of 1-10 (1 being extremely poor and 10 being excellent).

1 POOR 2 3 4 5 AVERAGE 6 7 8 9 10 EXCELLENT Quality of commitment to school/community Choice of post-secondary program Problem solving & analytical skills Self-sufficiency/resourcefulness Ability to set realistic goals Respect for self and others School/work/life balance Initiative APPRAISER'S NAME & TITLE: _____ PHONE: ORGANIZATION: ______ SIGNATURE: _____ High School Data: The following section should be completed by your school registrar, counselor or other school official with authorization to certify this information. CUMULATIVE GRADE POINT AVERAGE: TEST SCORES (if applicable) PSAT Verbal Math SAT Verbal Math ACT English Math OFFICIAL'S NAME & TITLE: _____ PHONE: _____ SCHOOL: ______ SIGNATURE: ____ APPLICANT SIGNATURE: _____ DATE: _____ PARENT/LEGAL GUARDIAN SIGNATURE: DATE: _____