

Application may be accessed on the First Community Foundation Partnership of PA's website:  
[www.fcfpartnership.org/apply/by-school-district](http://www.fcfpartnership.org/apply/by-school-district)

Submit application and required attachments for the following scholarship award(s) to your guidance office. Contact your guidance office for submission deadline date.

### **Daniel G. and Helen I. Fultz Scholarship Fund**

One scholarship will be awarded for 4 (four) years and equal to 1/4 (25%) of the available income for each respective year. Each recipient must continue to be a student in good standing at Lycoming College.

#### Selection Criteria:

- Graduating senior from Mifflin County High School, Mifflin County;
- Attend, full-time, an undergraduate program at Lycoming College, Williamsport, PA;
- Will have exhibited good citizenship and community involvement, be a leader with a sense of humor, be grounded, show tolerance of others, is honest, has integrity, and makes a difference in the school community;
- Will have an unmet financial need;
- Other than a strong potential for success, such factors as class rank and grade point average will not be criteria in making a selection unless in the judgment of the selection committee such factors are needed to distinguish between multiple potential candidates;
- **ESSAY QUESTION:** "Outline your ultimate career goals."

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Submit application and required attachments for the following scholarship award(s) by **April 15** to:  
First Community Foundation Partnership of PA  
Attn: Program Office  
201 West Fourth Street  
Williamsport, PA 17701

### **Jody Lea Loudenslager Scholarship Fund**

#### Selection Criteria:

- Be a current employee or a child of a current employee at Glenn O. Hawbaker, Inc.
- Attend an accredited two- or four-year institution of higher education
- **ESSAY QUESTION:** "Outline your ultimate career goals."

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Submit application and required attachments for the following scholarship award(s) at any time to:  
First Community Foundation Partnership of PA  
Attn: Program Office  
201 West Fourth Street  
Williamsport, PA 17701

### **Taylor J. Ertel Scholarship for Foster Children – (open application deadline)**

#### Selection Criteria

- On-going award on a first-come first-served basis until all available funds for the current year are committed.

- PA resident who has been placed in foster care by a child welfare agency at some point in their lives;
- Must be admitted to a program of study: training may range from short vocational courses such as cosmetology, data entry or welding, through college and graduate study
- **ESSAY QUESTION:** "Outline your ultimate career goals."



### Scholarship Application

*For High School scholarships, contact the Guidance Office for application submission deadline date*

**Applicant information.**

MISS \_\_ MR. \_\_ NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTY \_\_\_\_\_

CONTACT PHONE \_\_\_\_\_ H \_\_ C \_\_ EMAIL \_\_\_\_\_

HIGH SCHOOL (IF APPLICABLE) \_\_\_\_\_

COUNSELOR \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

AREA OF STUDY: MAJOR \_\_\_\_\_ MINOR \_\_\_\_\_

**List parents' or guardians' information.**

MS. \_\_ MRS. \_\_ MR. \_\_ NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTY \_\_\_\_\_

CONTACT PHONE \_\_\_\_\_ H \_\_ C \_\_ EMAIL \_\_\_\_\_

MS. \_\_ MRS. \_\_ MR. \_\_ NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ COUNTY \_\_\_\_\_

CONTACT PHONE \_\_\_\_\_ H \_\_ C \_\_ EMAIL \_\_\_\_\_

**List other household dependents. Give age, college, or occupation.**

_____	_____
_____	_____
_____	_____

**List name of institutions to which you have applied.**

_____	Pending __ Accepted __ Enrolled __
_____	Pending __ Accepted __ Enrolled __
_____	Pending __ Accepted __ Enrolled __

## College Costs / Financial Aid Information

Estimated Family Contribution (from FAFSA form) \_\_\_\_\_  
Estimated Cost of Tuition \_\_\_\_\_  
Estimated Cost of Room and Board \_\_\_\_\_  
Estimated Total of Financial Aid \_\_\_\_\_  
Total of other Scholarships/Awards received \_\_\_\_\_

### Required Attachments:

- Essay
  - Refer to scholarship criteria for specific question
- Resume/Activities
- Letter(s) of recommendation
  - Refer to scholarship criteria for letter requirements
- Must current school transcripts
  - Transcripts may not be required for all scholarships. Review to scholarship criteria for requirements

### TIPS on Essay, Resume and Recommendation Letters

#### Essay

Keep in mind that this is the only component of the application that allows you to tell the selection committee something about yourself. Demonstrate that you are goal-directed, motivated, and that you have a clearly-defined set of goals. Applications may be reviewed by different committees and their determination of the recipient may be based on the essay.

#### Resume

List the following information with year and approximate number of hours per week or month spent participating in each:

- Varsity, junior varsity, and/or community teams
- Memberships and participation in school organizations and activities, community organizations
- Leadership roles/elected offices
- Awards received
- Volunteer experience
- Employment experience

#### Letter of Recommendation

Provide reference letters from someone familiar with your goals and attributes. Consider a current or former teacher, coach, employer, clergy member, volunteer supervisor, neighbor or family friend. References from guidance counselors are not encouraged unless you have a unique relationship.

### Signatures are required

I hereby affirm that the information submitted is true and complete to the best of my knowledge. I authorize First Community Foundation Partnership of Pennsylvania (FCFP) to share this information with members of the selection committees.

I understand that all information is confidential and shared only with FCFP and members the selection committees.

I understand that late and/or incomplete applications will be disqualified.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
PARENT OR GUARDIAN'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DATE