

# GEORGE WITWER STAR SCHOLARSHIP

## **About the Donor**

The Kendallville Publishing Company established this scholarship to encourage students pursuing a journalism career in newspapers, magazines, radio or television.

## **Eligibility Criteria**

This scholarship is a one-time award to a graduating senior **-or-** graduate of any DeKalb County high school; **DeKalb High School, Eastside High School, Garrett High School, Hamilton High School (DeKalb resident only), Lakewood Park Christian School -or-** home schooled senior residing in DeKalb County, Indiana; studying **journalism**. Even though this is a non-renewable award, a recipient may continue to re-apply as long as they meet the criteria.

Applicant must also:

- Be a resident of DeKalb County, Indiana
- Enroll, or intends to enroll, full-time in a post-secondary educational institution

**Required Forms** (Complete and SAVE the forms, following the instructions listed below)

- Scholarship Cover Page
- Completed Application
- Editorial
- Two (2) Letters of Recommendation
- College Transcript

Attach an OFFICAL copy of your college transcript to your application or have it sent electronically to [scholarships@dekalbfoundation.org](mailto:scholarships@dekalbfoundation.org) by your college.

## **Deadline to Apply**

Submit all documents to [scholarships@dekalbfoundation.org](mailto:scholarships@dekalbfoundation.org) by **March 5, 2012**.

## **Scholarship Eligibility Policy**

In order to assure the public that DeKalb County Community Foundation maintains impartiality when awarding educational scholarships, the following individuals and their relatives\* are not considered eligible for scholarships provided by the foundation:

- Foundation Directors or Officers
- Foundation Employees
- Foundation Scholarship Committee members
- Foundation Scholarship Sub-Committee members
- High school staff members directly involved in the selection process

For a Director, Officer, Employee, Scholarship Committee member or Scholarship Sub-Committee member, this restriction applies for the year scholarships are awarded and for two years after he/she is no longer connected with the foundation in a volunteer or paid position.

For a high school staff member directly involved with the selection process, this restriction applies only for the year the scholarships are awarded.

\*Relatives are defined as follows: Spouse, lineal descendents (children, grandchildren, great grandchildren whether by whole or half blood, step-children, step-grandchildren, step-great grandchildren) and their spouses, brothers and sisters (whether by whole or half blood) and their spouses, as well as ancestors. Other relatives (i.e. nephew, niece, etc.) are eligible to receive scholarships provided by the foundation. Approved by the DeKalb County Community Foundation Board of Directors May 19, 2005.

# GEORGE WITWER STAR SCHOLARSHIP

## APPLICANT INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_  
Permanent Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ (mm/dd/yyyy)  
High School: \_\_\_\_\_ Graduation Year \_\_\_\_\_  
DeKalb County, Indiana Resident: \_\_\_\_\_ United States Citizen: \_\_\_\_\_ Gender: \_\_\_\_\_

## FAMILY INFORMATION

Name of father, stepfather or guardian: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Name of mother, stepmother or guardian: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Check if applicable:  Father deceased  Mother deceased  Parents divorced  
Ages of other children in your family: \_\_\_\_\_ # of family members in college: \_\_\_\_\_

## COLLEGE INFORMATION

Year in college (upcoming academic year): \_\_\_\_\_  
College or University attending: \_\_\_\_\_  
City and State of School: \_\_\_\_\_  Full-time  Part-time  
Major field of study: \_\_\_\_\_  
If part-time, # of credit hrs per sem.

## CAREER GOALS

Write a brief statement describing your career goals in the space below

\_\_\_\_\_

# GEORGE WITWER STAR SCHOLARSHIP

Last Name:

First Name:

<b>SCHOOL ACTIVITIES</b>		
List your extracurricular activities in the order of importance to you.		
Activity	Grade Participated (9,10,11,12)	Role or Leadership Position Held

<b>AWARDS AND HONORS</b>		
List any awards and honors you have received during high school.		
Award or Honor Received	Grade	Criteria Award Based On

<b>COMMUNITY SERVICE</b>			
These volunteer services must have taken place <b>outside</b> of school hours.			
Organization	Grade	Description of Services	Hours <small>(Total or per week)</small>

<b>EMPLOYMENT AND INTERNSHIPS</b>			
List your work and/or intern experience beginning with the most recent position.			
Organization	Type of Work	Dates Employed or Internship	Hours <small>(Total or per week)</small>

# GEORGE WITWER STAR SCHOLARSHIP

## EDITORIAL

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

*Note: This essay is to be completed on this page using a computer and the space provided below. The margins, type size and font are preset by the scholarship provider and are NOT to be changed. Attach to your completed application.*

Write an editorial (about 400 words) about an important issue or topic of your choice.

*(An editorial is not a by-lined column and is not written in first person. It should present a formal opinion backed by adequate research. The purpose of this editorial is to see how you express your ideas, not to judge your political views.)*

---

# GEORGE WITWER STAR SCHOLARSHIP

## LETTER OF RECOMMENDATION FORM

### Applicant Information

Complete the section below on the computer before submitting to your selected individual. Choose whether you want the letter to be returned to you or someone else, such as a guidance counselor, by checking the appropriate box.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Scholarship Applying for: \_\_\_\_\_

Recommendation Requested From: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to you (ie: coach, counselor): \_\_\_\_\_

Return to:  Applicant  \_\_\_\_\_ By Date: \_\_\_\_\_

-----

The above named student is applying for a scholarship and is requesting a letter of recommendation from you. This reference of personal character provides the scholarship committee with a more in-depth perspective of the applicant. Please take a few minutes to truly reflect on the applicant and include any information you feel would be beneficial to know.

If you are unable to complete this letter by the deadline, please notify the applicant so that he/she may secure another reference.

### When providing a letter of recommendation:

1. Please type your letter on a separate sheet of paper and attach this form.
2. Please incorporate the following topics in your letter:
  - Compare this student to others you have known.
  - Describe the qualities and characteristics you feel set this student apart from others.
  - Describe any special circumstances you feel are relevant.