

John D. Rudd Memorial Scholarship
2021 Application

(4-Year College or University)

Sponsored By

South Central Indiana REMC



Guidelines on Following Page

Deadline for Application: February 28, 2021 (noon)

South Central Indiana REMC

300 Morton Avenue

Martinsville, IN 46151

(765) 342-3344

(800) 264-7362 (toll-free)

www.sciremc.com

John D. Rudd Memorial Scholarship 2021 Application Guidelines

South Central Indiana REMC

The John D. Rudd Memorial Scholarship was established to encourage graduating senior students to further their education. This program, funded entirely by the voluntary contributions of the members of South Central Indiana REMC, will provide up to five (5) scholarships in the amount of \$1,000 each.

The program is open to all residents of Brown, Clay, Johnson, Monroe, Morgan, Owen, and Putnam counties who meet all of the following criteria:

- the applicant is a son, daughter, or legal dependent of a South Central Indiana REMC member who contributes to the Operation RoundUp® Program;
- the applicant will have graduated by the end of June 2021 with a diploma from an Indiana high school or an equivalent education; and
- the applicant has been accepted into an accredited college, university, or other program beginning in the fall of 2021.

The scholarship recipients are completely free to choose which educational institution they would like to attend.

Applicants are required to submit an essay. The essay description can be found on the next page.

The completed application and required attachments must be received in the office of the South Central Indiana REMC by noon on February 28, 2021. Email to OperationRoundUp@sciremc.com or mail to:

South Central Indiana REMC
300 Morton Avenue
Martinsville, IN 46151

Instructions:

1. Type or write legibly with black ink.
2. Make sure your name is on each page submitted.
3. Detach this page before submitting the application.
4. Attach additional pages, if necessary.
5. Include an official transcript with this application.
6. All requested information fields must be completed or an explanation given. Incomplete applications will not be considered.

**John D. Rudd Memorial Scholarship
2021 Application Guidelines**

South Central Indiana REMC

Essay

Applicants of the John D. Rudd Scholarship are required to submit an essay or personal statement of no more than 500 words on the following:

- South Central Indiana REMC's Operation RoundUp began in 1995 as an extension of the electric cooperative principle "neighbor helping neighbor." Detail how you have helped a neighbor, friend, or relative and demonstrated a cooperative spirit.
- Please use a separate sheet of paper.

This page intentionally left blank.

John D. Rudd Memorial Scholarship Application – 2021
Sponsored by South Central Indiana REMC
(4-Year College or University)

Applicant Information

Name _____
Mailing Address _____
City, State, Zip Code _____
County of Residence _____
Daytime Telephone Number _____
Name of High School _____
Name of High School Guidance Counselor _____
Graduation Date _____
College or University You Plan to Attend _____
Major Field of Study _____
Name of Parent/Guardian _____
South Central Indiana REMC Account Number _____
Do you participate in Operation RoundUp? ___ Yes ___ No (this is a requirement)

School Activities

List the significant activities you participated in during high school and check the boxes for the years of membership. Include clubs, organizations, athletics, music, plays, class offices, etc. *(If more space is needed, attach a separate sheet.)*

<u>Organization</u>	<u>Office/Position</u>	<u>Fresh.</u>	<u>Soph.</u>	<u>Jr.</u>	<u>Sr.</u>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Work Experience

List any jobs you have held during high school. This can include summer jobs or part-time jobs after school and on weekends. *(If more space is needed, attach a separate sheet.)*

<u>Position & Employer</u>	<u>Hours per Week</u>	<u>Dates of Employment</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name of Applicant: _____

Community Activities

List the significant community activities you participated in during high school and check the boxes for the years of service. Include service organizations, scouts, 4-H, youth groups, etc. *(If more space is needed, attach a separate sheet.)*

<u>Organization</u>	<u>Office/Position</u>	<u>Fresh.</u>	<u>Soph.</u>	<u>Jr.</u>	<u>Sr.</u>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Statement of Applicant and Guardian

We hereby affirm that the information provided on this form and any attachments is accurate and complete to the best of our knowledge. We do hereby grant permission for the release of the required scholastic records shown below. We further grant permission for the applicant's name and photo to be used by the South Central Indiana REMC if selected as a recipient of the scholarship.

Date: _____

Signature: _____

(Applicant)

Signature: _____

(Parent or Guardian)

(Please sign above before forwarding the application to the proper high school official.)

.....
Scholastic Record (to be completed by high school principal or counselor)

Name of Applicant: _____

Class rank of applicant (as of 12/31/2020): _____ of _____

GPA (as of 12/31/2020): _____ (based on a _____ scale)

SAT Scores (show by sections): _____ (Critical Reading) _____ (Math) _____ (Writing)

ACT Score (if taken): _____ (Please provide an explanation if neither SAT nor ACT has been taken)

Days Absent in 9th Grade: _____ Days Absent in 10th Grade: _____

Days Absent in 11th Grade : _____ Days Absent in 12th Grade (through 12/31/2020) : _____

Signature of School Official: _____

Printed Name of School Official: _____

Title: _____

****** Please attach an official school transcript to this application ******