

ELLA WEISS EDUCATIONAL FUND

Application for Academic Scholarship

Ella Weiss established the Educational Fund to provide scholarships to ***“worthy, needy and ambitious students under the age of 23 years, who are residents of Ohio, and who desire a college education at an Ohio educational institution and attend an accredited Ohio university which offers a 4 year program.”*** The scholarships are awarded on an annual basis by an Advisory Committee.

IMPORTANT: In order for your application to be considered, **ALL** of the following must be submitted to the following address and **postmarked no later than May 31st**.

FirstMerit PrivateBank
Attn: Toby Blossom
106 S. Main St., 5th Floor
Akron, OH 44308

To qualify for consideration of an Ella Weiss Scholarship, you **MUST** meet the following criteria:

- Minimum GPA of 2.80 **OR** Minimum Composite ACT Score of 22
- Adjusted Gross Income less than \$100,000 (per FAFSA form)
- Be an Ohio resident
- Be less than 23 years old
- Attend an Ohio community college or university (offering 2-4 year program)

In addition to the above requirements, you **MUST** submit the following information:

- Current FAFSA form
- Transcript of your credits and/or ACT scores (if you are a high school student, or a transcript of your college credits (if you are currently a college student)
- One personal recommendation from your teacher (if you are a high school student), or a recommendation from one of your college advisors (if you are currently a college student)
- Completed Application Form (see attached)

For questions, contact FirstMerit Bank at 330-384-7302.

ELLA WEISS EDUCATIONAL FUND

Application for Academic Scholarship

Name: _____ Phone #: _____
Last First Middle

Email address: _____

Home Address: _____
and Street City ST Zip

Social Security #: _____ DOB: _____ Marital Status: _____

High School and/or Colleges Attended:	Dates Attended:
_____	_____
_____	_____
_____	_____

High School Graduation Date (or expected date): _____

To what colleges have you applied for admission:

_____	Accepted? [] Yes [] No
_____	Accepted? [] Yes [] No
_____	Accepted? [] Yes [] No

If you have applied for or received an Ella Weiss Scholarship in the past, please complete:

School Year	Rejected	Awarded	Amount of Scholarship
_____	_____	_____	_____
_____	_____	_____	_____

Are you the beneficiary of any other scholarship award? Yes No

If yes, please describe the award: _____

List high school or college honors and extracurricular activities in which you participate:

List hobbies and out-of-school activities (youth groups, churches, etc.): _____

Estimate the amount needed to complete educational financing for year of application:

Do you have any learning disabilities? Yes No If Yes, please explain:

State clearly & concisely your reasons for desiring a college education, your scholarship objectives and the primary college course of study you wish to pursue:

COMMENT SECTION

Explain any special circumstances which the Advisory Committee should know.

Certification: I (We) declare that the information reported is true, correct & complete.

Applicant Signature

Parent's Signature (if FAFSA information reflects parent's financial information)

Date Completed