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**WEST POINT COMMUNITY FOUNDATION**

**“PASSING A TORCH  
TO OUR FUTURE”**

## **Allison Roeber Memorial Scholarship**

February 1, 2012

To Guidance Counselors:

The West Point Community Foundation is offering \$500.00 scholarships to current graduating seniors who are attending a High School that is approved and accredited by the State Department of Education. The applicant must be seeking continued education at a university, college, or technical school pursuing a degree in the field of Child Protection.

Enclosed are the applications for this scholarship. Please inform graduating seniors of this opportunity. All forms and letters may be duplicated. Please remind your students that all applications must be filled out completely and instructions followed. Incomplete applications or instructions not followed will result in the application not being considered.

Each scholarship applicant needs to complete the application packet (checklist provided) including the three references and mail to:

**Don Roeber  
1001 East Grove  
West Point, NE 68788**

**All applications with references must be received by March 16, 2012.**

Thank you for your help. If you have any questions please call any member of the Scholarship Committee.

### ***West Point Community Foundation Scholarship Committee***

Donna Graybeal. . . .372-5330	Dr. Brian Hass. . . .372-5690
Kelly Kaup. . . . .372-3965	Nancy Steffen . . . .372-2180
Chris Peatrowsky . . .372-5905	Dave Knievel. . . . .372-5741
Don Roeber. . . . .372-5702	

# **Allison Roeber Memorial Scholarship**

1. APPLICANT MUST BE A CURRENT GRADUATING SENIOR WHO IS ATTENDING A WEST POINT AREA HIGH SCHOOL THAT IS APPROVED AND ACCREDITED BY THE STATE DEPARTMENT OF EDUCATION.
2. APPLICANT MUST BE SEEKING CONTINUED EDUCATION AT A UNIVERSITY, COLLEGE, OR TECHNICAL SCHOOL OF APPLICANT'S CHOICE AND PURSUING A DEGREE IN THE FIELD OF CHILD PROTECTION.
  - 1) HEALTH CARE
  - 2) LAW ENFORCEMENT
  - 3) SOCIAL WORK
  - 4) ELEMENTARY TEACHER
  - 5) ANY OTHER CHILD PROTECTION EDUCATION
3. APPLICANT MUST PROVIDE THREE (3) CONFIDENTIAL REFERENCES WITH NO MORE THAN TWO (2) BEING FROM TEACHERS. ALL REFERENCES SHOULD BE FROM A NON-RELATIVE.
4. THE FOUNDATION WILL DETERMINE THE AMOUNT OF SCHOLARSHIP AWARDED EACH YEAR.
5. THERE IS NO LIMITATION ON PERSONS WHO ARE ELIGIBLE RECIPIENTS OF SCHOLARSHIPS. SCHOLARSHIPS WILL BE GIVEN WITHOUT REGARD TO RACE, CREED, RELIGION, NATIONAL ORIGIN OR SEX.
6. SCHOLARSHIP MONIES MUST BE USED WITHIN ONE ACADEMIC YEAR (JUNE 1, 2012 THRU JUNE 1, 2013)
7. SCHOLARSHIP MONIES WILL BE SENT TO THE WINNER WHEN THE SCHOLARSHIP COMMITTEE HAS BEEN PROVIDED WITH PROOF THAT THE STUDENT HAS ENROLLED IN SCHOOL. PROOF WILL BE A PHOTOCOPY OF THE STUDENT'S COLLEGE I.D. CARD.
8. THE SCHOLARSHIP COMMITTEE WHO ARE MEMBERS OF THE WEST POINT COMMUNITY FOUNDATION WILL SELECT SCHOLARSHIP WINNERS.
9. APPLICANT MUST SIGN A LETTER OF EXPECTATION AS ACCEPTANCE.
10. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED OR CONSIDERED. PLEASE REVIEW YOUR APPLICATION FOR COMPLETENESS TO DETAIL, FILLING OUT ALL REQUESTED INFORMATION. CHECKLIST PROVIDED.
11. APPLICATION MUST BE RECEIVED BY **MARCH 16, 2012.** SEND TO:

**Don Roeber  
1001 East Grove Street  
West Point, NE 68788**

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## **Allison Roeber Memorial Scholarship**

Dear Applicant:

The West Point Community Foundation is offering \$500.00 scholarships to graduating seniors who will be enrolled in a field that will help children. If you are chosen to receive one of these scholarships, it will be necessary for you to complete at least one year of classes and maintain a minimum 2.5 GPA. If you drop out of school without completing the first semester, we would expect the return of the \$500.00 so the money be used by another student.

We hope you will consider applying for this scholarship if you are able to follow the guidelines. Please sign this letter of expectation to indicate that you accept these requirements and return it with your application by March 16, 2012 to Don Roeber, 1001 East Grove Street, West Point, Nebraska 68788.

If you have any questions please call any member of the Scholarship Committee.

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*Applicant (Student) Signature of Acceptance*

# Allison Roeber Memorial Scholarship

APPLICANT NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

PARENT(S) OR GUARDIAN(S)' NAME: \_\_\_\_\_

ADDRESS OF PARENT(S) OR GUARDIAN(S): \_\_\_\_\_  
TOWN: \_\_\_\_\_

HIGH SCHOOL CURRENTLY ATTENDING: \_\_\_\_\_

I PLAN TO ATTEND (SCHOOL NAME): \_\_\_\_\_

ACCEPTED (\_\_\_\_) YES (\_\_\_\_) NO MAJOR AREA OF STUDY \_\_\_\_\_

OCCUPATIONAL INTERESTS UPON GRADUATION FROM POST SECONDARY SCHOOL \_\_\_\_\_

HIGH SCHOOL ACTIVITIES AND AWARDS: \_\_\_\_\_

COMMUNITY ACTIVITIES: \_\_\_\_\_

I HOPE TO BE INVOLVED IN THE FOLLOWING ACTIVITIES IN COLLEGE \_\_\_\_\_

**ON THE BACK OF THIS FORM** PLEASE STATE IN **100 WORDS OR LESS** WHY YOU WOULD LIKE TO BE CONSIDERED FOR THIS SCHOLARSHIP.

## ADMINISTRATION CERTIFICATION

I HEREBY CERTIFY THAT \_\_\_\_\_ HAS SHOWN OUTSTANDING ABILITY AS IS EVIDENCED BY HIS/HER LEADERSHIP, CITIZENSHIP, CHARACTER, AND COOPERATION IN SCHOOL AND COMMUNITY ACTIVITIES AND HAS A SATISFACTORY SCHOLARSHIP RECORD IN ALL HIGH SCHOOL SUBJECTS.

AVERAGE NUMERICAL GRADE IN ALL HIGH SCHOOL SUBJECTS \_\_\_\_\_  
NUMBER OF STUDENTS IN APPLICANT'S CLASS \_\_\_\_\_  
APPLICANT'S RANK IN CLASS \_\_\_\_\_

\_\_\_\_\_  
Superintendent, Principal or Guidance Counselor Signature

# Allison Roeber Memorial Scholarship

CONFIDENTIAL REFERENCE STATEMENT

APPLICANT (STUDENT) NAME:
APPLICANT (STUDENT) ADDRESS:
REFERENCE FROM (NAME):
HOW LONG HAVE YOU KNOWN THE APPLICANT?
IN WHAT CAPACITY?
WHAT DO YOU CONSIDER THE APPLICANT'S STRONG POINTS?
WHAT DO YOU CONSIDER THE APPLICANT'S LIMITATIONS?

PLEASE CHECK THE FOLLOWING CHARACTERISTICS FOR THE APPLICANT (COMPARED TO THE STUDENTS OF THE SAME AGE AND GRADE).

CHARACTERISTIC	SUPERIOR	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	DO NOT KNOW
INTELLECTUAL INTEREST					
RELIABILITY					
COOPERATION					
MATURITY					
PERSONAL APPEARANCE					
SOCIAL ADAPTABILITY					
EMOTIONAL ADAPTABILITY					
ABILITY TO SUCCEED IN POST SECONDARY EDUCATION					

**IMPORTANT**

(UNSIGNED REFERENCES WILL NOT BE CONSIDERED)

SIGNED BY:

REFERENCE MUST BE COMPLETED, RETURNED TO THE APPLICANT IN A SEALED ENVELOPE ADDRESSED TO THE **WEST POINT COMMUNITY FOUNDATION SCHOLARSHIP COMMITTEE** FOR THE APPLICANT TO SUBMIT TO THE SCHOLARSHIP COMMITTEE NO LATER THAN **MARCH 16, 2012**.

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## STUDENT SCHOLARSHIP APPLICATION CHECKLIST COVER

APPLICANT (STUDENT) NAME: \_\_\_\_\_ (PLEASE PRINT)

APPLICATION ITEMS ATTACHED:

\_\_\_\_\_ APPLICANT LETTER (SIGNED)

\_\_\_\_\_ APPLICANT/STUDENT INFORMATION (COMPLETED AND APPROPRIATELY SIGNED)

\_\_\_\_\_ THREE (3) REFERENCES IN SEALED ENVELOPES – ENVELOPES ADDRESSED TO THE  
WEST POINT COMMUNITY FOUNDATION SCHOLARSHIP COMMITTEE

ALL ITEMS MUST BE COMPLETED, SIGNED AND ATTACHED OR THE APPLICATION WILL BE CONSIDERED INCOMPLETE AND  
INELIGIBLE FOR SCHOLARSHIP CONSIDERATION

DATED: \_\_\_\_\_

\_\_\_\_\_  
**APPLICANT (STUDENT) SIGNATURE**