

THE COMMUNITY FOUNDATION OF BURKE COUNTY

WYNNE AND OTTO WOERNER ENDOWMENT SCHOLARSHIP FUND

DESCRIPTION

The Wynne and Otto Woerner Endowment Scholarship was established by Otto Woerner in 2003. The primary purpose of the fund is to provide financial resources for the higher education of a young person in Burke or McDowell County who would not otherwise be able to continue their education.

ELIGIBILITY

Two \$2,500 scholarships will be offered to a resident of Burke or McDowell County or a past scholarship recipient. Scholarships will be awarded without regard to race, creed, sex, ethnic background or handicap.

CRITERIA (IN ORDER OF PRIORITY)

- 1st Financial need
- 2nd Top half of class
- 3rd Commitment to complete a four year degree

“THE PRIMARY PURPOSE OF THE FUND IS TO PROVIDE FINANCIAL RESOURCES FOR THE HIGHER EDUCATION OF A YOUNG PERSON IN BURKE OR MCDOWELL COUNTY WHO WOULD NOT OTHERWISE BE ABLE TO CONTINUE THEIR EDUCATION.”

SELECTION PROCESS

The Scholarship Committee at high schools in Burke County may submit one nominee each for this scholarship. The recommended recipient’s application, including all attachments, must be sent to the Community Foundation of Burke County by March 1st. The Scholarship Committee of the Community Foundation of Burke County will review all nominees and make its recommendation to the Board of Directors. The Board of Directors of the Community Foundation of Burke County shall give final approval to the nominee who is awarded the scholarship.

PAYMENT OF AWARDS

Payment of scholarship awards will be made directly to the college or university in accordance with the financial policies established by the Board of Directors of CFBC.

The scholarship recipient must provide the Community Foundation of Burke County with an official transcript from the college or university he/she attended at the end of each academic year for which a scholarship is received.

If you are a graduating senior, please submit a completed application to your guidance department by February 20th.

If you are currently enrolled in college, please submit a completed application to the Community Foundation of Burke County by February 20th.

NAME _____

SCHOOL ACTIVITIES

In the space provided below or on a separate page, please list extracurricular activities in which you have participated during the past four years of high school. If currently attending college or graduate school, attach a list of the extracurricular activities that you have been involved in since entering college. Include clubs, sports, student government, fine arts, etc.

ACTIVITY	9 th	10 th	11 th	12 th	APPROX. TIME OUTSIDE CLASS HRS/WK WKS/YR	LEADERSHIP POSITIONS, LETTERS EARNED, AWARDS, RECOGNITION, ETC.

COMMUNITY & PERSONAL ACTIVITIES

In the space provided below or on a separate page, list community, church/synagogue and personal activities in which you have participated during the past four years of high school. If currently attending college or graduate school, attach a list of the community, church/synagogue and personal activities in which you have participated since entering college. Include volunteer work, youth programs, athletic programs, music, dance, scouting, 4-H, or hobbies to which you have devoted time.

ACTIVITY	9 th	10 th	11 th	12 th	APPROX. TIME OUTSIDE CLASS HRS/WK WKS/YR	LEADERSHIP POSITIONS, LETTERS EARNED, AWARDS, RECOGNITION, ETC.

WORK EXPERIENCE

In the space provided below or on a separate page, please list any work experience (including self-employment) you have had during the past four years. Include summer jobs as well as employment during the school year. Complete this information beginning with your most recent work experience.

EMPLOYER – Contact Person & Phone	Position	Dates Employed	Hours/Week

NAME _____

COLLEGE/UNIVERSITY INFORMATION (FOR THOSE PLANNING TO ATTEND COLLEGE FOR THE FIRST TIME)

What major(s) would you like to pursue? _____

Please complete the following information for your top three college choices.

1. School/City/State: _____

Admission status: _____ Application Pending _____ Enrollment Offered _____ Enrollment Offer Accepted

2. School/City/State: _____

Admission status: _____ Application Pending _____ Enrollment Offered _____ Enrollment Offer Accepted

3. School/City/State: _____

Admission status: _____ Application Pending _____ Enrollment Offered _____ Enrollment Offer Accepted

COLLEGE STATEMENT: Attach a brief statement telling us why these institutions are most appealing to you.

COLLEGE/UNIVERSITY INFORMATION (FOR THOSE CURRENTLY ENROLLED IN COLLEGE OR GRADUATE SCHOOL)

What major are you pursuing? _____

Please list the colleges you have attending and are currently enrolled in:

1. College/University/City/State: _____

Class Status: _____ Freshman _____ Sophomore _____ Junior _____ Senior Years Attended: _____

2. College/University/City/State: _____

Class Status: _____ Freshman _____ Sophomore _____ Junior _____ Senior Years Attended: _____

3. College/University/City/State: _____

Class Status: _____ Freshman _____ Sophomore _____ Junior _____ Senior Years Attended: _____

RECOMMENDATIONS

Please make copies of the attached form and submit no more than three (3) recommendations from a teacher or school official, a club or community sponsor/advisor or any non-family member. All recommendations should be on the attached form and returned to the scholarship committee in a sealed envelope with signature across the seal.

OTHER AWARDS

Please list below or on a separate page the name, amount and status of any grants or scholarships for which you have applied for the coming school year.

NAME OF AWARD	AMOUNT	GRANTED	PENDING

Please notify the Community Foundation of Burke County office of any grants or scholarships you receive after you submit this application.

NAME _____

CERTIFICATION

In voluntarily submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted. I give my permission to this Scholarship Selection Committee, the Community Foundation of Burke County Scholarship Committee, the Directors of the Community Foundation of Burke County and the Community Foundation of Burke County staff to release information contained in this application for the purposes of determining and publicizing scholarship awards.

Applicant's Signature _____

Date _____

- **Before submitting this application, please make a copy for your records.**
- **Insert all attachments inside the application and clearly indicate your name on the top right corner of all attachments.**
- **Do not use staples, since applications must be copied.**

If you are a graduating senior, please return a completed application to your high school guidance department by February 20.

If you are currently attending college , please return a completed application to the Community Foundation of Burke County, P.O. Box 1156, Morganton, NC 28680-1156, by February 20.

For more information, contact:

The Community Foundation of Burke County ~ Telephone: (828) 437-7105 ~ E-mail: info@cfburkecounty.org

