

**Janet L. Henc Scholarship
Venango Area Community Foundation**

RETURN PROMPTLY TO: Bridge Builders Community Foundations, 206 Seneca Street, Oil City, PA 16301

DEADLINE: March 31, 2012

TYPE OR PRINT ALL ENTRIES IN INK

1. NAME: _____

2. SOCIAL SECURITY NUMBER: _____

3. ADDRESS: _____

4. CITY: _____ TOWNSHIP: _____ COUNTY: _____

5. STATE: _____ ZIP CODE: _____ TELEPHONE NUMBER: _____

6. BIRTH DATE: _____ HIGH SCHOOL GRADUATION DATE: _____

7. HIGH SCHOOLS ATTENDED:

NAME: _____	FROM: _____	TO: _____
NAME: _____	FROM: _____	TO: _____
NAME: _____	FROM: _____	TO: _____

8. SCHOOL YOU ARE PLANNING TO ATTEND: _____

SCHOOL ADDRESS: _____

MAJOR FIELD OF STUDY: _____

LENGTH OF PROGRAM: _____

OCCUPATIONAL GOAL: _____

YEAR OF COLLEGE/TRADE SCHOOL COMPLETED BY MAY 2012: _____

9. COSTS PER YEAR:

A. TUITION and FEES: \$ _____

B. ROOM and MEALS: \$ _____

C. TOTAL COSTS PER YEAR: \$ _____

10. FATHER'S NAME: _____

ADDRESS: _____

11. MOTHER'S NAME: _____

ADDRESS: _____

12. How often do you attend Sunday morning services at **GALLOWAY UNITED METHODIST CHURCH**: _____

In connection with this application for a scholarship from the Janet L. Henc Scholarship, I hereby authorize the administrator serving this program to request from any school attended by me: information, transcripts, financial aid records and any other records deemed necessary for the administration of this scholarship program, and I authorize any such school to submit any information, transcripts and other records that may be requested by the scholarship administrator.

Signature of Applicant _____ Date _____

Attach any pertinent information that may not be covered regarding your request for this scholarship.

Parent's e-mail address: _____

Student's e-mail Address: _____

Janet L. Henc Scholarship

There are many factors that help the scholarship committee determine those best qualified to receive this award including use of time outside of the classroom. The following questions are designed to help the committee become more familiar with each applicant.

13. What extracurricular activities have you been involved in the past two years (please list each activity and describe your participation in it)?

14. What types of paid employment have you had during the past two years (please list employer, dates of employment and type of work)?

15. What have you enjoyed learning most as a high school student?

INFORMATION ON F.E.R.P.A. AND USE OF YOUR SOCIAL SECURITY NUMBER

The F.E.R.P.A. of 1974 requires that each federal, state or local agency that asks for your social security number or other information must tell you the following:

1. Its legal right to ask for the information and whether the law says you must give it;
2. What purpose this agency has in asking for it and how it will be used; and
3. What could happen if you do not give it.

The number is needed to be sure we know who you are, to process your application, and to keep track of your record. We use your social security number in recording information about your college attendance; and in making sure that you have received the benefit of this scholarship. If you do not give us your social security number, you will not receive aid from the Janet L. Henc Scholarship Fund. Henc scholarship applicants are hereby advised that disclosure of their social security number is a requirement and a condition for receiving a Janet L. Henc Scholarship Fund. This agency, without such an identifier, would have difficulty in maintaining proper program records. Section 7(a)(2) of the F.E.R.P.A. provides that an agency may continue to require the disclosure of an individual's social security account number where the agency required this disclosure under statute or regulations prior to January 1, 1975, in order to verify the identity of the individual. Beginning in 1978 applicants for Venango Area Community Foundation scholarships have been required to answer all questions completely or face disqualification for grant assistance. All subsequent forms utilized by this agency contain the social security account number as the identifier of the applicant, including eligibility announcements forwarded to the student and the financial aid officer of the postsecondary institution.

STATEMENT OF CERTIFICATION OF AUTHORIZATION

By signing the application, I/we authorize this agency for any year in which the applicant is considered for a Janet L. Henc Scholarship Fund: to make public announcement of any Henc award made to the applicant; to investigate in any manner deemed appropriate by this agency, the eligibility of the applicant for an Henc Scholarship; to forward to the postsecondary institution(s) which the applicant listed or subsequently indicates that the applicant may attend and to others administering financial aid which may bear on eligibility under the application, all information on any application and all information subsequently submitted to or acquired by the Agency. I/we also authorize and direct other federal, state and local government agencies, my high school, and my present and future employers to release to this agency information in their possession which may bear on my eligibility under the application. I/we understand that all documents submitted to this agency become the property of this agency and cannot be returned. I/we declare under penalty of the criminal laws of the Commonwealth of Pennsylvania that the application has been examined by me/us and to the best of my knowledge and belief is a true, correct and complete application. I, the applicant, understand that this scholarship, if awarded, cannot exceed unpaid charges by the institution for educational costs as determined by this agency (tuition and mandatory fees, room and board, and an academic year allowance for books.)

STATEMENT OF CERTIFICATION OF AUTHORIZATION

By signing the Application for the Janet L. Henc Scholarship Fund, I/we hereby affirm that the signature below constitutes acceptance of the Statement of Certification of Authorization on this page, which is incorporated herein by reference and which I/we have read, understand, agree to and certify.

SIGNATURE OF STUDENT _____ **DATE** _____

PARENT'S SIGNATURE _____ **DATE** _____
(Required if student is less than the age of 18)