The Whelan Foundation Scholarship Program PO BOX 2232 Halesite, NY 11743

The Whelan Foundation's mission is to award grants to support the higher educational goals of its recipients. It is our goal to equalize opportunities for recipients on Long Island that are normally denied them because of cost.

The Whelan Foundation believes that everyone should have the chance to succeed.

Applications must be postmarked by June 1, 2020.

Only complete applications will be forwarded to The Whelan Foundation Committee for consideration. Each application must include the following:

- 1. Whelan Foundation Application for Scholarship Award.
- 2. Two letters of reference from current faculty members. Additional letters of reference from faculty members may be included, but not required.
- 3. One certified copy of current transcript. Faxed transcripts will not be accepted.
- 4. Hand-written essay (2 pages only): Your career goal inspirations and aspirations, describing your personal strengths, including motivation, leadership, commitment and addressing your need and why you are deserving of the Whelan Foundation scholarship support.

Students applying to the Whelan Foundation Scholarship Program must meet the following qualifications for consideration:

Requirements:

- 1. Students must be at least graduating high school seniors from Long Island who are enrolling as a full time student at an accredited college/university in the United States pursuing a degree in the field of Special Education.
- 2. Students must demonstrate financial need.
- 3. Students must have a minimum grade point average of 3.5 (on a 4.0 scale)
- 4. Students must be a U.S. citizen or legal resident.
- 5. Students must maintain a full time enrollment and be in good standing with their college to have the award renewed for the academic year.
- 6. Students must be enrolled in a program at an accredited four-year college or university majoring in education.
- 7. Students must complete and document a minimum of 80 hours in volunteer hours working in the area of special education for their high school career.
- 8. Student must rank in the top 20% of their senior class.
- 9. Student must maintain a minimum grade point average of 3.2 (on a 4.0 scale) during their college career.

Selection Process:

- 1. An independent scholarship committee will be evaluating student credentials. From the pool of applicants, a selected group of recipients will be presented to the Whelan Foundation board and they will in turn select the scholarship winners
- 2. Finalists will be required to attend an interview with the Scholarship committee.
- 3. All materials submitted to support a scholarship application are used only in the selection process. The folder of the scholarship recipient will remain in active status during the period the scholarship is in force. All records are confidential and available for reference by the Scholarship Committee and the Whelan Foundation board.
- 4. (2) Scholarships for candidates studying Special Education totaling up to \$10,000.00 per school year (50% per semester). To be reviewed annually for renewal.

Selection Criteria

Applicants are evaluated on the following criteria:

- 1. Academic record
- 2. Financial need
- 3. Application preparation
- 4. Letters of Recommendation
- 5. **Transcript** Provide an **official** transcript from your current high school. Transcript must include a cumulative GPA and the scale of the GPA ranking. If your transcript does not show a cumulative GPA, request that a school official confirm the information on school letterhead with his or her signature. Transcript must have the name of your high school and your name, Social Security number, and date of birth.
- 6. **Financial Information Documentation** The following documents are essential to the processing of your application. If you applied for federal financial aid, include a copy of Student Aid Report (SAR).

Note: Be sure to apply early for federal student aid at www.fafsa.ed.gov. If you have not applied for federal financial aid, include a copy of your 1040, 1040 EZ, or 1040A federal tax return and W-2 form(s). Also include copies of your parents' federal income tax return(s) and W-2 form(s).

You will be notified of the scholarship and the amount to be awarded by July 15, 2020.

Who to contact with questions?

Thomas Schloen

Whelan Foundation, PO Box 2232 Halesite, NY 11743

thomas.schloen@gmail.com



The Whelan Foundation Scholarship Program

TYPE OR PRINT ALL INFORMATION CLEARLY Completeness and neatness will ensure your application will be reviewed properly. **Deadline June 1, 2020**

APPLICANT INFOR	MATION				
Last Name		First Name	Middle Initial		
Mailing Address		Apartm	nent # City		
_ State	ZIP Code	Telephon	e () Email		
Address		Social Security Num	ber Date		
of Birth: Month	DayYear	Are you a U.S. citizen or l	egal resident? [] Yes [] No		
How did you learn a	bout this scholarshi	p?			
Gender (For statistic	Gender (For statistical purposes only) [] Male [] Female				
Race (For statistical	Race (For statistical purposes only) [] American Indian/Alaska Native [] Asian				
		[] Black/African America	n [] Hispanic/Latino		
		[] White [] Other			
PARENT OR GUARI	DIAN INFORMATIO	N			
Last Name	I	First Name	Middle Initial		
Work Telephone (_		Fax Number ()			
Email Address	Email Address Social Security Number				
Name of Employer					
Job Title		Department			
City	State _	Dates of Employme	nt: to		
Relationship to Applicant					
Name and telephone number of HR Representative who can verify your employment:					
Telephone Number ()					
THE	WHELA	N FOUNDA			
HIGH SCHOOL INFORMATION					
School Name		Graduation Date:	MonthYear		
City		tate Telephon	e Number		

SECONDARY SCHOOL INFORMATION

Name of post secondary school schools to which you have appl	ied) Use official school names,	do not use abbreviation	is.	
School				
	City			
CitySta				
Year in school next year [] 1st				
or course of study	Expected college	graduation date	Degree	
sought:[]Bachelor[]Other	Student will: []li	ve on campus []off car	mpus If school	
choice is a public institution, ap	plicant will pay: [] in-state tui	tion [] out-of-state tui	tion	
WORK EXPERIENCE				
Describe your work experience d approximate number of hours wo Employer/Position	orked each week. List wages earn	ed at each job.	or each job, and	
From: MonthYear	_To: MonthYear	Amount Earned		
Employer/PositionYear	_To: MonthYear			
ACTIVITIES, AWARDS AND H	ONORS			
List all school activities in which activities in which you have par awards and offices held.				
Activity	Activity			
# Years participated	# Years part	icipated _		
Special Awards	Special Awards			
Offices Held _	Offices Held _	DATION. I		
Activity				
			Special	
•	# Years participatedSpecial Special AwardsOffices			
Held	_			
				

GOAL/ASPIRATIONS
Make a brief statement or summary of your plans as they relate to your education, career objectives, and long-term goals.
UNUSUAL CIRCUMSTANCES
Please describe how and when any unusual family, or personal circumstances have affected your
achievement in school, work experience, or your participation in school and community activities.
ESSAY (REQUIRED)
On separate sheets of paper, please respond to the following topic. Applicants who do not specifically address this topic will not be considered. Your essay should not exceed two hand written pages on 8 ½" x 11" paper. Include your name, and the name of the scholarship program at the top or each page. TOPIC: Your career goal inspirations and aspirations, describing your personal strengths, including motivation, leadership, commitment and addressing your need and why you are deserving of the Whelan Foundation scholarship support.
OTHER AWARDS
Please list the name and annual amount of any grants or scholarships you have been awarded for the
coming school year only.
Name of Award: Name of Award:
School to which will be applied
Amount \$[] Grant [] Pending Amoun t\$ [] Grant [] Pending

TRANSCRIPT INFORMATION

TRANSCRIFT INFORMATION
A complete transcript of grades must be sent with the application. Grade reports are not acceptable. All applicants must include an official high school transcript of grades and have this section completed by the appropriate school official. An explanation of the school's grading scale must also be submitted.
Cumulative Grade Point Average: Weighted/4.0 scale Unweighted/4.0 scale
SAT Scores in: Critical Reading Math Writing
ACT Score in: English Math Reading Science Composite
Applicant Ranks # in a class of
School official's SignatureDateTitle
Telephone # ()
School Official's Address: StreetCityState
APPLICATION CHECKLIST
The student is responsible for submitting all materials to The Whelan Foundation Scholarship Committee on time. Incomplete or late applications will not be reviewed. This application becomes complete and valid only when all of the following materials have been received: [] Student Application [] Current Complete Official Transcript(s) of grades (including grade scale) [] Student Essay [] Two letters of reference from current faculty members. [] Financial Information Documentation – The following documents are essential to the processing of your application. If you applied for federal financial aid, include a copy of Student Aid Report (SAR). All materials, including transcript, must be addressed to: The Whelan Foundation Scholarship Program PO BOX 2232 Halesite, New York 11743
Postmark deadline: June 1, 2020
CERTIFICATION The Whelan Foundation has the responsibility for selecting recipients based on criteria as set forth in the program description. This application becomes the property of The Whelan Foundation. I acknowledge that all decisions are final. I certify that I meet the eligibility requirements of the program as described in the guidelines, and the information provided is complete and accurate to the best of my knowledge. If requested I will provide proof of information, including but not limited to: a copy of my U.S. Income Tax Return, and an official transcript of grades. Falsification of information may result in the termination of my award granted. If selected as a finalist, I give my permission to The Whelan Foundation to use a photo of me on their website.
Applicant's Signature Date

WHELAN FOUNDATION SCHOLARSHIP PROGRAM Confidential Recommendation Form – **Due June 1, 2020**

INSTRUCTIONS FOR STUDENT APPLICANT:

STUDENT NAME:

- 1. Enter your name above
- 2. Save this document with the title: LAST NAME RECOMMENDATION (e.g., Doe recommendation.docx)
- 3. Forward this document to the individual who is submitting your recommendation
- 4. If the person is unable to complete the document electronically, you may print the document for him/her.

INSTRUCTIONS FOR INDIVIDUAL COMPLETING RECOMMENDATION

- 1. The student who requested that you complete this form is applying for a scholarship to be awarded by the Whelan Foundation for the 2020-2021 academic year. Selection is generally based on academic achievement, personal motivation, contribution to high school life and leadership quality.
- 2. Please complete and e-mail this recommendation form to Thomas.schloen@gmail.com. If you are unable to e-mail the form you can print

TITLE:

and mail to Whelan Foundation Scholarship Committee, PO Box 2232 Halesite, NY 11743.

PHONE: How long have you known t	he applicant?					
In what capacity?						
Please rate (x) the applicant in the fol	lowing categor	ies relative to o	ther students yo	u have known:		
	Outstanding	Excellent	Good	Fair	Poor	Unable to judge
Academic achievement:						
Contribution to college life:						
Demonstrated leadership abilities:						
Personal motivation and direction:						

Overall rating:

NAME:

ADDRESS:

Comments: (Please note: you may attach a separate sheet if you prefer.)

THE WHELAN FOUNDATION, INC.

helping our community

AGREEMENT & RELEASE

The Whelan Foundation, Inc. ("Foundation") congratulates you on being selected as a recipient of the Foundation's Scholarship Award. Please review the terms of this Agreement & Release ("Agreement"), and sign and return this Agreement to the Foundation. If you are under the age of eighteen (18), please have your parent/guardian also sign this Agreement.

1. The student hereby represents that he/she meets the requirements for the

Scholarship Award set forth below:

- (a) The student is a graduating high school senior from Long Island who is enrolling as a full time student at an accredited college/university in the United States
- (b) The student demonstrates financial need.
- (c) The student has a minimum grade point average of 3.5 (on a 4.0 scale).
- (d) The student is a U.S. citizen or legal resident.
- (e) The student must maintain a full time enrollment and be in good standing with his/her college to have the award renewed for the academic year.
- (f) The student must be enrolled in a program at an accredited four-year college or university majoring in education.
- (g) The student must complete and document a minimum of 80 hours in volunteer work in the area of special education during his/her high school career.
- (h) The student is in the top 20% of his/her senior class.
- (i) The student must maintain a minimum grade point average of 3.2 (on a 4.0 scale) during his/her college career.
- 2. If in the Foundation's sole opinion the student fails to meet the requirements set forth in this Agreement, the Foundation may, at its sole discretion, cease any further payments under the Scholarship Award.
- 3. The student agrees that the Foundation may use his/her name, likeness and the name of the school he/she will be attending in any of its promotional or informational materials, including invitations, press releases, journals, advertisements and fundraising solicitations. The

Foundation will not utilize any information provided by the student other than his/her name, likeness and school he/she will be attending without his/her express written permission.

4. The Scholarship Award will be paid directly to the higher education institution that the student will be enrolled in to offset tuition payments. If the student ceases to be enrolled in and/or attend a higher education institution, the Foundation will cease any further payments and will be entitled to any refund made by the higher education institution of advanced tuition payments. If the student decides to change the higher education institution that he/she is attending the student must notify the Foundation, in writing, and future payments will be made to the new institution, provided that the student is enrolled in and attending that school and continues to meet the requirements set forth in this Agreement.

STUDENT	PARENT/GUARDIAN	
Signature	Signature	
Print Name:	Print Name:	
Date:	Date:	