# 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 March 30, 2021.

Applicants related to the Whelan family or any current board members are not eligible.

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/ continuing education pursuing a degree in the field of Special Education, occupational therapy, speech pathology, other behavioral majors.
- 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. Grades to be submitted every semester to the Whelan Foundation.

## 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 \$20,000 per school year for 4 years (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 90 days after application is reviewed by the scholarship committee.

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 March 30, 2021

## **APPLICANT INFORMATION**

Last Name	First Name	Middle Initial	
Mailing Address		Apartment #	
City	State	ZIP Code	
Telephone ()		Email Address	
Social Security Number	ial Security Number Date of Birth: Month DayY		
Are you a U.S. citizen or legal resident?	] Yes [ ] No		
How did you learn about this scholarship	p?		
Gender (For statistical purposes only)	[ ] Male [ ] Female		
Race (For statistical purposes only)	[ ] American Indian/Alaska Native [ ] Asian		
	[ ] Black/African American [ ] Hispanic/Latino		
	[] White [] Other		
PARENT OR GUARDIAN INFORMATIO	N		
Last NameF	irst Name M	Iiddle Initial	
Work Telephone ()	Fax Number ()		
Email Address Social Security Number			
Name of Employer			
Job Title	Department		
CityState_	Dates of Employment:	to	
Relationship to Applicant			
Name and telephone number of HR Repr	resentative who can verify your emplo	yment:	
	Telephone Number ()		
HIGH SCHOOL INFORMATION	ing our community		
School Name	Graduation Date: Month	Year	
City	tate Telephone Number	r	

## **SECONDARY SCHOOL INFORMATION**

Name of post secondary school you pla schools to which you have applied) Use			
School		City	State_
School			
School			
] 4 year College or	University	[ ]	Other, explain _
Year in school next year	[ ] 1 <sup>st</sup> Yea	r [	] Other, explain _
Major or course of study	$-\mathbf{W}$	Expected	college graduation date _
Degree sought:[ ]Bachelor[ ]Other	Studer	ıt will: [ ]live	e on campus [ ]off campus
If school choice is a public institution, a	npplicant will pay:[]	in-state tuiti	ion [ ] out-of-state tuition
WORK EXPERIENCE			
Describe your work experience during the approximate number of hours worked eac Employer/Position	ch week. List wages ear	rned at each jo	ob.
From: MonthYearTo: Mo	nthYear	Amount E	arned
Employer/Position		Hours per	week
From: MonthYearTo: Mo	nthYear	Amount E	arned
ACTIVITIES, AWARDS AND HONORS			
List all school activities in which you ha activities in which you have participated awards and offices held.		-	-
Activity	Activity		
# Years participated	# Years pa	rticipated _	
Special Awards	Special Aw	vards	
Offices Held _	Offices Hel		
Activity	Activity		
# Years participated			# Years participated _
Special Awards			Special Awards
Offices Held	Offices He	ld	

GOAL/ASPIRATIONS	
Make a brief statement or summary of your plans and long-term goals.	as they relate to your education, career objectives,
	1 1
UNUSUAL CIRCUMSTANCES	
Please describe how and when any unusual family achievement in school, work experience, or your	
ESSAY (REQUIRED)	
address this topic will not be considered. Your ess ½" x 11" paper. Include your name, and the name	e following topic. Applicants who do not specifically say should not exceed two hand written pages on 8 of the scholarship program at the top or each page. ons, describing your personal strengths, including ing your need and why you are deserving of the
OTHER AWARDS	
Please list the name and annual amount of any gra	ants or scholarships you have been awarded for the
coming school year only.	OUNDATION, INC.
Name of Award: helping of School to which will be applied	Name of Award:
Amount \$ [ ] Grant [ ] Pending	Amoun t\$[] Grant [] Pending

## TRANSCRIPT 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 complete 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: Street State
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: March 30, 2021
Postmark deadline: March 30, 2021
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. Incom 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 – March 30, 2021

## INSTRUCTIONS FOR STUDENT APPLICANT:

#### STUDENT NAME:

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

- 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.

ADDRESS:						
PHONE: How long have you known the	he applicant?					
In what capacity?						
Please rate (x) the applicant in the following	lowing categorie	s relative to other	students you l	nave known:		
	Outstanding	Excellent	Good	Fair	Poor	Unable to judge
Academic achievement:						
Contribution to college life:						
Demonstrated leadership abilities:						
Personal motivation and direction:						
Overall rating:						

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 fouryear 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.

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: