



## **The Ivin S. & Virginia D. Bear Scholarship Fund**

### **Application Form**

The Ivin S. & Virginia D. Bear Fund is an endowment fund of The Greater Harrisburg Foundation from which part of the income is used to assist students with college tuition expenses.

The Bear Fund will award several scholarships to graduating seniors or current post-secondary students who are nominated by the York-Adams Area Council, Boy Scouts of America. All scholarship recipients must have attained the rank of Eagle Scout in the York-Adams Area Council. The scholarship will be renewable (applicant must reapply each year) for up to eight semesters total (four academic years), providing the students maintains a minimum grade point average of 3.0 on a four-point scale. Maximum grant amount per student per year is \$2,500.

The scholarship is available for tuition, books, supplies and fees. It cannot be used for room and board. The Foundation does not pay scholarships to individuals, but instead authorizes the grant to be paid to the college or university to be credited to the individual student's account.

Selection criteria include scholastic ability, career goals, financial need and community service.

To apply, complete the application and all required attachments by the deadline dates listed below. The materials must be submitted to the York-Adams Area Council, Boy Scouts of America. A committee appointed by the Council's Executive Board will review the application. The Committee may elect to schedule interviews with applicants, as it deems necessary. The Greater Harrisburg Foundation will notify the winners.

Complete the attached form and requested supporting documents (print in ink or type) and return to:

***Bear Eagle Scout Scholarships  
Scout Executive  
York-Adams Area Council, Boy Scouts of America  
2139 White Street  
York, PA 17404-4940  
(717) 843-0901***

***Submission Deadline for 2004-2005 Academic Year – June 30, 2004***

**Student Background**

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_  
Street or PO Box City State Zip County

Telephone: (717) \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Area Code

High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Name of Principal: \_\_\_\_\_ School Phone Number: (717) \_\_\_\_\_  
Area Code

Date of Eagle Award: \_\_\_\_\_ Troop No. at Time of Eagle Award: \_\_\_\_\_

=====  
Name of Post-Secondary Institution you will be/ are attending: \_\_\_\_\_

Course of Study: \_\_\_\_\_

Entrance Date: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

Occupation Plans: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Number of Dependents: \_\_\_\_\_

**Other Financial Aid You Have Applied For**

<u>Name of Scholarship or Loan</u>	<u>Amount Requested</u>	<u>Amount Granted</u>

**Parent of Guardian Background**

**Father:** \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Area Code Home Area Code Work

Address: \_\_\_\_\_  
Street or PO Box City State Zip County

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

**Mother:** \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Area Code Home Area Code Work

Address: \_\_\_\_\_  
Street or PO Box City State Zip County

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

**Scholastic Record**

Include an official record of your complete high school record through the immediate prior grading period OR current post-secondary transcript. Any transcript submitted must have the raised school seal imprinted and include cumulative grade point average.

**Extracurricular Activities**

On a separate sheet of paper, list your most significant extracurricular or non-academic activities, emphasizing work experience, community service and Scouting service with the dates of these activities.

Please attach an essay on the topic: "How I Am Preparing for My Life Goals." **The essay should be titled, typewritten, double-spaced and a maximum of 300 words.**

**Financial Aid Information**

Please include a **photocopy** of your **Free Application for Federal Student Aid (FAFSA)** with your completed Ivin S. & Virginia D. Bear Fund Eagle Scout Scholarship Application.

I hereby affirm the information herein is correct and I promise to notify The Greater Harrisburg Foundation of any changes in enrollment status and/or change of address at school or home if scholarship is awarded:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Return this form and the requested attachments to the York-Adams Area Council, Boy Scouts of America, by the deadlines as noted on the cover sheet of the application materials.**

**Verification of Family Income**

**A written release of information:**

I, \_\_\_\_\_, understand this information will be confidential, used only to determine the eligibility of my son for a scholarship for post-secondary education/training from The Greater Harrisburg Foundation. This form will be used only for this purpose and will not be seen by any unauthorized person(s).

Please PRINT or TYPE the following information:

**A.**

Name of Applicant: \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_  
Area Code

Address: \_\_\_\_\_  
Street or PO Box City State Zip County

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Grade in School \_\_\_\_\_

**B.**

List all income of applicant, income of father and income of mother (or guardians) in the space below:

Name	Relationship to Applicant	Occupation	Working Hours	Annual Income

If additional space is required, continue on reverse side of this application.

I certify that the information provided above is true and correct.

\_\_\_\_\_  
 Signature of Head of Household

**Please be sure that your son returns the completed application to the York-Adams Area Council, Boy Scouts of America, by the deadlines stated on the cover sheet of the application materials.**