SHELBY COOPER MEMORIAL SCHOLARSHIP

This scholarship is in memory of Shelby Ann Cooper. Shelby was a junior at Lucas High School in 2004. At 16 years of age, her life was cut short due to an automobile accident. Shelby was very active in community service, extracurricular activities, athletics, and was able to maintain a 3.3 grade point average. We were very proud of her accomplishments. Shelby had a dream to attend college. Now, in Shelby's memory, our promise to her and ourselves would be to help other students achieve their dreams by attending college. This is why we have established this scholarship fund.

Qualifiers for this scholarship are:

- 1. Lucas High School Senior
- 2. Grade Point Average. Attach a copy of your high school transcript.
- 3. Completion of application and returned to the High School Guidance Counselor by THE FIRST FRIDAY IN APRIL OF SENIOR YEAR.
- 4. Recommendation forms completed and returned to the High School Guidance Counselor by THE FIRST FRIDAY IN APRIL OF SENIOR YEAR.
- 5. Admitted to an accredited college or university.

Criteria:

- 1. Quality essay
- 2. Scholarship
- 3. Extracurricular Activities
- 4. Community Involvement/Service

Winners of this scholarship will:

receive \$1000.00 with direct payment to the student upon completion of their first quarter or semester.

have their name and year placed on a plaque. be announced at graduation.

Scholarship Selection Committee:

High School Principal High School Teacher Middle/Elementary School Teacher Guidance Counselor Athletic Director Mr. and Mrs. Timothy Cooper (non-voting)

Completed Applications must be received by the High School Guidance Counselor no later than THE FIRST FRIDAY IN APRIL OF YOUR SENIOR YEAR and include the following:

- 1. High School transcript with GPA
- 2. Application Form
- 3. Application Essay
- 4. Recommendations from
 - a. One teacher
 - b. One adult related to one of your Extracurricular Activities
 - c. One adult related to one of your Community Involvement/Service participations

Application Essay: Why are you applying for this scholarship and how is it consistent with your educational/career/life goals? (Typed and double spaced. Name on each page. 750 words or less.)

APPLICATION FORM FOR THE Shelby Cooper Memorial Scholarship

(To be completed by the student applicant, typed or printed legibly in black ink.)

LAST NAME	FIRST		MIDDLE
ADDRESS: STREET	CITY	ZIP CODE	TELEPHONE NUMBER

NAME OF COLLEGE OR UNIVERSITY TO WHICH YOU HAVE BEEN ACCEPTED SOCIAL SECURITY NUMBER

Extracurricular Activities (i.e. School related athletics, clubs.) Check the grades when the activities occurred. Please do not use abbreviations.

Activity	9 th	10 th	11 th	12 th	Leadership Positions/Honors
	grade	grade	grade	grade	

Community Involvement/Service (i.e. Church, 4-H) Check the grades when the activities occurred. Please do not use abbreviations.

occurred. I fease do no					
Activity	9 th	10^{th}	11^{th}	12^{th}	Leadership Positions/Honors
	grade	grade	grade	grade	

I affirm that all information provided is true to the best of my knowledge.

SHELBY COOPER MEMORIAL SCHOLARSHIP

Community Involvement/Service Recommendation

Name of Applicant: _______ In what capacity and how long have you known the applicant?

Compared to other students of comparable age and experience you have known in the last five years, how would you rate the applicant in the following areas? (1=Below average, 2=Average, 3=Good, 4=Very good, 5=Exceptional, 6=no basis for evaluation)

	1	2	3	4	5	6
Maturity						
Motivation						
Moral character						
Leadership Potential						
Communication skills						
Ability to work with others						
Imagination and Originality						
Independence and Self-Reliance						
Commitment to excellence of effort						
Potential for success at post-secondary education						

Please add any descriptive comments that would, in your opinion, support this candidate on the back of this form.

Name: (Please print or type)	
Title of Position	
Address:	

SIGNATURE

DATE

SHELBY COOPER MEMORIAL SCHOLARSHIP

Extracurricular Recommendation

Name of Applicant: ____

In what capacity and how long have you known the applicant?

evaluation) the applicant in the following areas? (1=Below average, 2=Average, 3=Good, 4=Very good, 5=Exceptional, 6=no basis for Compared to other students of comparable age and experience you have known in the last five years, how would you rate

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Maturity						
Motivation						
Moral character						
Leadership Potential						
Communication skills						
Ability to work with others						
Imagination and Originality						
Independence and Self-Reliance						
Commitment to excellence of effort						
Potential for success at post-secondary education						
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Name: (Please print or type)						
Title of Position						
Address:						

SIGNATURE

DATE

Name of Applicant:						
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Potential for success at post-secondary education						
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Title of Position						
Address:						
SIGNATURE DATE						

SHELBY COOPER MEMORIAL SCHOLARSHIP **Teacher Recommendation**

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