

# The Steven J. Bilecky Memorial Scholarship Fund, INC.

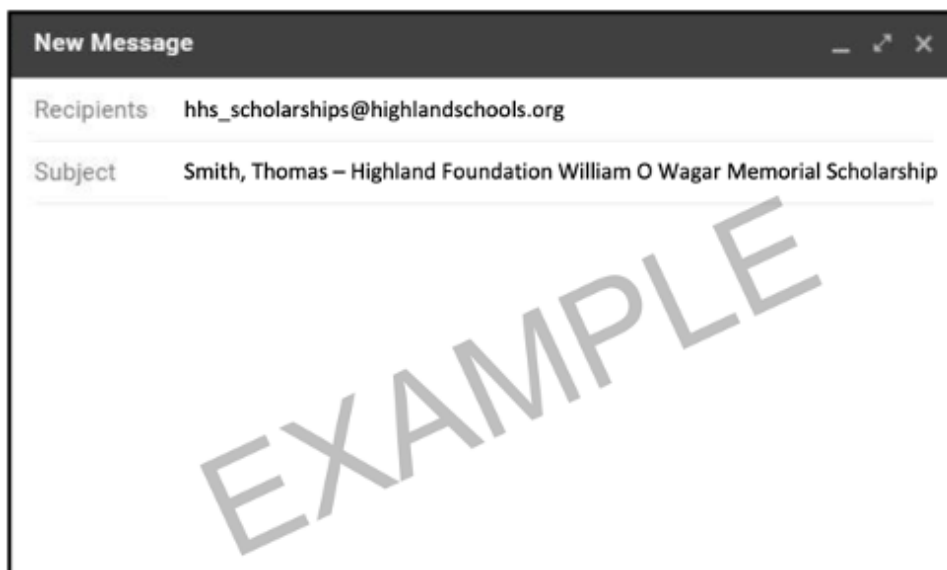
## Scholarship Application

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**Instructions for Scholarship Submission – Please read the following carefully**

**Due Date – Applications must be submitted by March 15<sup>th</sup>, 2024.**

1. Please read the scholarship description as well as the eligibility criteria before filling out the scholarship application. We encourage you to apply for all scholarships where you meet the eligibility requirements. Please complete the scholarship application in its entirety. If sections are missing, the application will not be accepted.
2. Each scholarship must be emailed as one PDF file to [hhs\\_scholarships@highlandschools.org](mailto:hhs_scholarships@highlandschools.org). Include the following information in the subject line of the email (example below)
  - Your Last Name
  - Your First Name
  - Name of the scholarship



3. If you are applying for multiple scholarships, please send each one in a separate email.
4. If a transcript is required, the counseling department will attach it to your submission once it is received.
5. If a letter of recommendation from a staff member within Highland High School is required, please ask the recommender to scan and submit separately to [hhs\\_scholarships@highlandschools.org](mailto:hhs_scholarships@highlandschools.org).
6. If an outside recommendation letter is requested, it must be attached as part of your scholarship application.
7. Scan and submit your completed application to [hhs\\_scholarships@highlandschools.org](mailto:hhs_scholarships@highlandschools.org).

**VERY IMPORTANT - ALL PAGES OF EACH SCHOLARSHIP MUST BE SUBMITTED AS ONE PDF FILE.**

# **The Steven J. Bilecky Memorial Scholarship Fund, Inc.**

## **INFORMATION FOR THE STUDENT**

### **Standards of Selection:**

1. Cumulative Grade Point Average for seven (7) consecutive semesters of high school class work of at least 3.5
2. Have demonstrated high achievement in scholastic activities
3. Have a record of performance in activities both in school and in the community
4. Have a sound interest and positive attitude toward college work
5. Have completed and executed the Waiver set forth on Page 1 of the attached scholarship application
6. Complete Part I of the attached Scholarship Application
7. Have Principal, Counselor, or Teacher complete Part II recommending you for this scholarship
8. Participate in a personal interview with the Fund's scholarship committee.

# Highland Foundation Scholarship Cover Sheet

This cover sheet must be submitted with your scholarship application.

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The following information will be used to contact the applicant for interview appointment, questions, clarifications, public relations, etc.

Please be sure the information is current and accurate.

**Student's Name (First / Last)** \_\_\_\_\_

**Student's Address** \_\_\_\_\_

\_\_\_\_\_

**Student's School Email Address** \_\_\_\_\_@HLND.ORG

**Student's Personal Email Address** \_\_\_\_\_

**Students' Contact Number (Best phone number to reach you)** \_\_\_\_\_

**Parent's Name(s)** \_\_\_\_\_

**Parent's Email Address(es)** \_\_\_\_\_

# The Steven J. Bilecky Memorial Scholarship Fund, Inc. Scholarship Application

**Please note:** Students applying for this scholarship should complete Part I. The Principal, Counselor, or Teacher should complete Part II.

The Scholarship Selection Committee of the Fund will screen applicants and interview finalists to select the best prospective student to receive a scholarship from the Fund.

Please read the following and sign below

*I understand that by completing this application, I am applying for a scholarship from **The Steven J. Bilecky Memorial** at \_\_\_\_\_*

*(College / University at which I have been accepted and am enrolled)*

*In the event I do not attend this college/university or any other college/university, I understand and agree that I forfeit all of my rights in and to any scholarship **The Steven J. Bilecky Memorial Scholarship Fund, Inc.**, may have awarded to me.*

*This application also constitutes a waiver whereby I authorize the Scholarship Selection Committee to request a copy of my entire file at Highland High School and my entire admissions file at the college/university, including, but not limited to my application for admission, financial aid materials and letters of recommendation (even though I may not have seen such letters).*

*In the event I receive a scholarship from **The Steven J. Bilecky Memorial Scholarship Fund, Inc.**, I understand that I am required to submit periodic progress reports to **The Steven J. Bilecky Memorial Scholarship Fund, Inc.***

*In the event that I am unable to do so or am unable to provide you with copies of the information you request, I hereby authorize **The Steven J. Bilecky Memorial Scholarship fund, Inc.** to request a copy of my academic file, including, but not limited to my transcripts at Highland High School and the above-referenced college/university.*

*A copy of this application shall serve as Highland High School's and such college/university's authority to make my entire files available to you, including, but not limited to my admission and academic files, both of which may be verified by Highland High School and such college/university, as appropriate.*

*I hereby waive any privacy rights, which would otherwise prevent Highland High School and such college/university from making my files available to you.*

**Print Name** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

# The Steven J. Bilecky Memorial Scholarship Fund, Inc.

## Part 1: Students Responsibility (Please Type)

<b>First and Last Name</b>	
<b>Home Address</b>	
<b>Phone Number</b>	
<b>Graduation Date</b>	

College to which you have been accepted and to which you will attend:

<b>Name</b>	
<b>Address</b>	
<b>Phone Number</b>	
<b>Financial Aid Officer</b>	

About you:

<b>Outstanding High School Achievements</b> (Awards, Honors, Leadership role)	
<b>Example of High School Activities</b>	
<b>Volunteer service to your community</b> (Not school related)	
<b>Employment Experience</b> (Type of job & number of hours per week)	
<b>What are your educational and career goals?</b>	

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## Part 2: Principal, Counselor, or Teacher Responsibility (Please Type)

<b>Number in Graduating Class:</b>	
<b>GPA:</b>	
<b>Assessment of High School work and estimate of success in college:</b>	
<b>Additional Comments:</b>	

**Print Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Date:** \_\_\_\_\_